

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-44693
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-5999
Lease Name or Unit Agreement Name Bell Lake Unit North
8. Well Number 401H
9. OGRID Number 12361
10. Pool name or Wildcat Ojo Chiso, Wolfcamp, SW
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3518 GR

HOBBS OCD
 APR 25 2019
 RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK OR A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Kaiser-Francis Oil Company

3. Address of Operator
P. O. Box 21468, Tulsa, OK 74121-1468

4. Well Location
 Unit Letter E : 2100 feet from the North line and 325 feet from the West line
 Section 1 Township 23S Range 33E NMPM Lea County

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <u>Completion</u>	<input checked="" type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Completion began 1/28/19 Completion finished 3/30/19

- MIRU WL.
- TCP'd first stage @ 19920'-20036'. Broke down perms.
- Stage frac'd lateral 12430'-20036' in 43 stages w/440,986 bbls fluid + 21,421,727# sd.
- Drilled out plugs and cleaned out lateral to PBDT w/coiled tbg. Flowed well back.

Spud Date:

11/7/18

Rig Release Date:

12/27/18

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

Charlotte Van Valkenburg

TITLE Mgr., Regulatory Compliance

DATE

4/24/19

Type or print name Charlotte Van Valkenburg

E-mail address: Charlotv@kfoc.net

PHONE: 918-491-4314

For State Use Only

APPROVED BY:

Karen Sharp

TITLE Staff Mgr

DATE 5-1-19

Conditions of Approval (if any):