

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. <b>30-025-23945</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>E-5705</b>
7. Lease Name or Unit Agreement Name <b>IVANU "2-A"</b>
8. Well Number <b>1</b>
9. OGRID Number <b>373671</b>
10. Pool name or Wildcat <b>North Vacuum APO</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4032.5 GL</b>

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

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
**Unitex Oil Services LLC.**

3. Address of Operator  
**508 W. Wall St. Ste. 1000 Midland, TX 79701**

4. Well Location  
 Unit Letter **N** : **1980** feet from the **West** line and **460** feet from the **South** line  
 Section **1** Township **17-S** Range **24-E** NMPM **Lea County**

**HOBBS OCD**

**JUL 02 2019**

**RECEIVED**

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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: <input 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.

**Pull tubing & packer. Replace packer and test tubing. Run back in hole with log & set packer.**

**Est. start date - July 2019**

**Condition of Approval: notify  
 OCD Hobbs office 24 hours  
 prior of running MIT Test & Cha**

Spud Date:  Rig Release Date:

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

SIGNATURE Laurie Taxiarcho TITLE Operations Engineer DATE 6-24-19  
 Type or print name Laurie Taxiarcho E-mail address: ltaxiarcho@unitexoil.com PHONE: 432-685-0044  
**For State Use Only**

APPROVED BY: Kevin Int TITLE Compliance Officer DATE 7-8-19  
 Conditions of Approval (if any):