

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 August 1, 2011

HOBBES OGD
 SEP 03 2019
 RECEIVED

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

WELL API NO. 30-025-24254
5. Indicate Type of Lease STATE X FEE
6. State Oil & Gas Lease No. B-934
7. Lease Name or Unit Agreement Name NEW MEXICO M STATE
8. Well Number 065
9. OGRID Number 8359
10. Pool name or Wildcat LANGLEY MATTIX 7-R, QN., GYBR.

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

1. Type of Well: Oil Well Gas Well X Other

2. Name of Operator
 GP II ENERGY, INC.

3. Address of Operator
 P.O. BOX 50682, MIDLAND, TEXAS 79710

4. Well Location
 Unit Letter K : 2630 feet from the SOUTH line and 1330 feet from the WEST line
 Section 29 Township 22S Range 37E NMPM EDDY County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3,368' - GR

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A X CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: WELL PLUGGED AND ABANDONED 08/26/19.	

J.P.M.

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.

- 08/24/19: SET 5-1/2" CIBP @ 3,450'; CIRC. WELL W/ M.L.F.; PUMP 25 SXS. CMT. @ 3,450'-3,320'; PUMP 25 SXS. CMT. @ 2,710'-2,590'; PERF. SQZ. HOLES @ 2,400'; ATTEMPT TO EST. INJ. RATE - PRES. UP TO 1,000# X HOLD; PUMP 25 SXS. CMT. W/ 2% CACL @ 2,450' (PER OCD); WOC.
- 08/25/19: TAG CMT. PLUG @ 2,191' (OK'D BY OCD); PERF. SQZ. HOLES @ 1,425'; ATTEMPT TO EST. INJ. RATE - PRES. UP TO 1,000# X HOLD; PUMP 45 SXS. CMT. @ 1,475' (PER OCD); WOC X TAG CMT. PLUG @ 1,025' (OK'D BY OCD); PERF. X SQZ. TO SURF., FILLING ALL ANNULI, 55 SXS. CMT. @ 372'-3' (PER OCD).
- 08/26/19: DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL ABOVE GROUND DRY HOLE MARKER.

MIRU PXA EQUIP.: 08/23/19

RDMO PXA EQUIP.: 08/26/19

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

SIGNATURE David A. Eyer TITLE: AGENT DATE: 08/27/19

Type or print name: DAVID A. EYLER E-mail address: DEYLER@MILAGRO-RES.COM PHONE: 432.687.3033
For State Use Only

APPROVED BY: Kerry Fortner TITLE C. O. A DATE 9-6-19
 Conditions of Approval (if any):