

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

RECEIVED
 OCT 10 2019
 HOBBS OCD

WELL API NO. 30-025-48131 46271
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name GAZELLE 32 STATE COM IBS
8. Well Number 4H
9. OGRID Number 372137
10. Pool name or Wildcat CORBIN; BONE SPRING, SOUTH (13160)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3759' GR

SUNDAY 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 Other : SWD/INJECTION

2. Name of Operator
CHISHOLM ENERGY OPERATING, LLC

3. Address of Operator 801 CHERRY ST., SUITE 1200-UNIT 20
FORT WORTH, TX 76102

4. Well Location
 Unit Letter D : 110 feet from the NORTH line and 1310 feet from the WEST line
 Section 32 Township 18S Range 33E NMPM County LEA

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: COMPLETIONS OPERATIONS <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.

09/17/2019-CALC TOC @ 4435'; PBTD @ 13667'; RUN CBL
 09/18/2019-SET PLUG @ 13650' MD; PRESSURE TEST PROD CSG TO 9880 PSI , 30 MIN, GOOD TEST; PERFORATE STAGE 1 @ 13635'MD - 13455' MD
 09/23-09/27/2019-PERFORATE STAGE 2-22 @ 13425'MD - 9045'MD; FRAC ALL 22 STAGES W/524 BBLs HCl + 134368 BBLs SW W/4419092# 100 MESH + 2534149# 40/70 SAND
 09/29-09/30/2019-DRILLOUT
 10/2/2019-WELL TURNED OVER TO PRODUCTION
 10/05/2019-WELL TURNED TO FLOWBACK

Spud Date: 08/22/2019

Rig Release Date: 09/11/2019

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

SIGNATURE Jennifer Elrod TITLE SR. REGULATORY ANALYST DATE 10/08/2019

Type or print name JENNIFER ELROD E-mail address: jelrod@chisholmenergy.com PHONE: 817-953-3728
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 11/01/19
 Conditions of Approval (if any):