Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		30-025-03152
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> - (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE S FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505 SUNDRY NO	TICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPI	OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A LICATION FOR PERMIT" (FORM C-101) FOR SUCH	South Vacuum Unit
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other	8. Well Number 353
2. Name of Operator		9. OGRID Number 164070
Catena Resources Operating, LLC 3. Address of Operator	<u> </u>	10. Pool name or Wildcat
18402 US Hwy 281 N, Suite 258	San Antonio, TX 78259	Vacuum, Devonian, South
4. Well Location		
Unit LetterC_:_	660 feet from the <u>North</u> line and <u>1980</u>	feet from the <u>West</u> line
Section 35	Township 18S Range 35E	NMPM Lea County
	11. Elevation (Show whether DR, RKB, RT, GR, etc.)
<u> </u>	3870' GR	
12 Check	Appropriate Box to Indicate Nature of Notice,	Report or Other Data
		•
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
		_
PULL OR ALTER CASING	-	
DOWNHOLE COMMINGLE	· · · I	
CLOSED-LOOP SYSTEM		
OTHER:	OTHER:	
	pleted operations. (Clearly state all pertinent details, and ork). SEE RULE 19.15.7.14 NMAC. For Multiple Con	
proposed completion or re		inplotions. Attach welloofe diagram of
On behalf of Catena Resources this C-103 is being submitted to request the subject well be allowed to continue in TA status.		
A CIBP was set at 11,420' above the Devonian perforations from 11,520-11,580' & 11,600' -11,670'.		
On 4-18-17 Paladin Energy Corp. tested the 5 ½" casing to 570 psi for 30 minutes. Pressure held, see attached chart		
on 1 to 17 talabilit 2005g, complication 3 72 caping to 370 por for 30 minutes. Freezant nota, see attached chart		
		•
		Condition of Approval: notify
		OCD Walls or
Spud Date: 3/21/2004	Rig Release Date: 4/19/2004	OCD Holibs office 24 hours
Spaa 24.0.		prior of running MIT Test & Chai
I hereby certify that the information	above is true and complete to the best of my knowledge	e and belief.
Taga 1	∞	
SIGNATURE KUCHEL	TITLE Regulatory Analyst III	DATE12/4/2019
Tyme or print name Deahal Miles	E mail addressil-a@i	ones not DUONE: (202) 200 1556
Type or print name Rachel Milne For State Use Only	E-mail address: _ramilne@progressiv	epcs.net Prione: (303) 309-1656
~/	$1 + c_0 = 1$	10 10 10
APPROVED BY: New Forthe TITLE C.O A DATE 12-10-19 Conditions of Approval (if any)		