

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. 30-025-03152
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 South Vacuum Unit
8. Well Number 353
9. OGRID Number 164070
10. Pool name or Wildcat Vacuum, Devonian, South
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3870' GR

**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  Other  **HOBBS OCD**

2. Name of Operator  
Catena Resources Operating, LLC

3. Address of Operator  
18402 US Hwy 281 N, Suite 258 San Antonio, TX 78259

4. Well Location  
 Unit Letter C : 660 feet from the North line and 1980 feet from the West line  
 Section 35 Township 18S Range 35E NMPM Lea County

JAN 09 2020

RECEIVED

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

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

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'.

A bradenhead and MIT test were run on the subject well on 12-27-2019 and witnessed by the commission.

**FINAL TA STATUS- EXTENSION**

Approval of TA EXPIRES: 1-31-21  
 Well needs to be PLUGGED OR RETURNED  
 to PRODUCTION  
 BY THE DATE STATED ABOVE: XC 7

Spud Date: 3/21/2004

Rig R#

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

SIGNATURE Rachel Milne TITLE Regulatory Analyst III DATE 1/8/2020

Type or print name Rachel Milne E-mail address: ramilne@progressivepcs.net PHONE: (303) 309-1656

**For State Use Only**

APPROVED BY: Kerry Fort TITLE CO A DATE 1-22-20  
 Conditions of Approval (if any):

District I  
 1625 N French Dr., Hobbs, NM 88240  
 Phone (575) 393-6161 Fax: (575) 393-0720

State of New Mexico  
 Energy, Minerals and Natural Resources Department  
 Oil Conservation Division Hobbs District Office

**BRADENHEAD TEST REPORT**

Operator Name <b>CATENA RESOURCES OPERATING, LLC</b>		API Number <b>30-025-03152-0000</b>
Property Name <b>SOUTH VACUUM UNIT</b>		Well No. <b>353</b>

**1. Surface Location**

U/L - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
C	35	18-S	35-E	660	N	1980	W	LEA

**Well Status**

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INJ SWD	<input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS	12/27/19

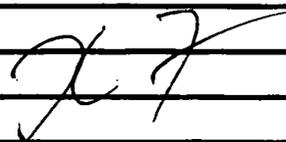
**OBSERVED DATA**

	(A)Surf/Intern	(B)Intern(1)	(C)Intern(2)	(D)Prod Csg	(E)Tubing
Pressure	0	NA	NA	0	0
<b>Flow Characteristics</b>					TA
Puff	Y/N	Y/N	Y/N	Y/N	CO2
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR
Surges	Y/N	Y/N	Y/N	Y/N	GAS
Down to nothing	Y/N	Y/N	Y/N	Y/N	If applicable type
Gas or Oil	Y/N	Y/N	Y/N	Y/N	fluid injected for
Water	Y/N	Y/N	Y/N	Y/N	Waterflood

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

TA STATUS TEST  
 Kenmore welding  
 ser# 71672-13  
 cal 12-23-19

S 560 #      E 560 #

Signature:	<b>OIL CONSERVATION DIVISION</b>
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: 12/27/19	Phone:
Witness: <b>KERRY FORTNER-OCD 575-399-3221</b>	

