

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. 30-025-24459
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Ojo Chiso
8. Well Number 1
9. OGRID Number 370997
10. Pool name or Wildcat Devonian
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL 3482

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 SWD

2. Name of Operator
Gramma Ridge Disposal, LLC

3. Address of Operator
Box 1105 Eunice, NM 88231

4. Well Location
Unit Letter E : 1980 feet from the N line and 660 feet from the W line
Section 23 Township 22 Range 34E NMPM Lea County

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.

SEE ATTACHED WORKPLAN.

HOBBS OCD
FEB 04 2020
RECEIVED

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 Eddie W. Seay TITLE Agent DATE 2/4/2020

Type or print name Eddie W. Seay E-mail address: seay04@leaco.net PHONE: 575-392-2236

For State Use Only

Petroleum Engineer

APPROVED BY: [Signature] TITLE _____ DATE 02/09/2020

Conditions of Approval (if any):

**ATTACHMENT TO C-103
Ojo Chiso #1**

(13) Workplan for repairs.

Operator noticed pressure on casing 2/2/2020.

- (1) Immediately shut well in.**
- (2) Notified OCD of pressure 2/3/2020 - Mr. Robinson.**
- (3) Will get earliest available rig.**
- (4) Install BOP - Notify OCD before releasing pkr.**
- (5) Rig up unit.**
- (6) Pull tubing and packer, make needed repairs.**
- (7) Re-run equipment, set pkr., test for repairs.**
- (8) If OK, load backside, run MIT w/OCD**
- (9) If passes, put back on injection. File C-103 subsequent report.**

HOBBS OCD

FEB 04 2020

RECEIVED