

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.

Santa Fe, NM 87505

WELL API NO.

30-025-33822

5. Indicate Type of Lease

STATE ☐FEE ☒

6. State Oil & Gas Lease No.

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 ☐

2. Name of Operator

RAND ENERGY

3. Address of Operator

720 E. Pack Blvd Ste. 102 PLANO TEX. 75074

4. Well Location

Unit Letter H : 2090 Feet From The 200 NORTH Line and 660 Feet From The East LineSection 31 Township 14S Range 35E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

4056 RKB

11.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐PLUG AND ABANDON ☒REMEDIAL WORK ☐ALTERING CASING ☐TEMPORARILY ABANDON ☐CHANGE PLANS ☐COMMENCE DRILLING OPNS. ☐PLUG AND ABANDONMENT ☐PULL OR ALTER CASING ☐CASING TEST AND CEMENT JOB ☐OTHER: ☐OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

- 7.5' mud between all plugs
- ① 5 1/2" CBP @ 12,000' w/ 35' cement (a) 255x5 or 100' whichever greater @ 9500'
- ② 455x across 5 1/2" stub ± 7000' WOC + TAG
- ③ 505x across 8 1/2" shoe 6259-6159 WOC + TAG
- (a) 255x or 100' whichever greater @ 2950' TOP OF VATES 3(b) - 255x or 100' whichever greater @ 1900' TOP OF SALT.
- ④ 505x across 13 3/8" shoe inside 8 1/2" 300-350
- ⑤ 1" 5x SURF install DRY hole marker

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

NOTE: 8 1/2" CSG @ 6209' Cemented to SURF

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

SIGNATURE

TITLE

DATE

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: