

| Submit One Copy To Appropriate Dispect 0 2 2019 State of New N   | Mexico Form C-103                            |  |
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| Submit One Copy To Appropriate District One Copy To Appropriate Di | atural Resources Revised November 3, 2011    |  |
| 1625 N. French Dr., Hobbs, NM 88779 CTI ARIES HU.  | WELL API NO.<br>30-005-63692                 |  |
| 611 5. 1 list 5t., Altosia, NW 66210   | 1 1 Indicate Type of Lease                   |  |
| District III<br>1000 Rio Brazos Rd., Aztec, NM 87410<br>1000 Rio Brazos Rd., Aztec, NM 87410   | rancis Dr. STATE STATE FEE                   |  |
| District IV Santa Fe, NIVI   |  |  |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505   | LG-155                                       |  |
| SUNDRY NOTICES AND REPORTS ON WEL<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101)  | PLUG BACK TO A WILLOW CREEK BFI STATE        |  |
| PROPOSALS.)<br>1. Type of Well: Oil Well Gas Well Other  | 8. Well Number 7                             |  |
| 2. Name of Operator  | 9. OGRID Number                              |  |
| VANGUARD OPERATING LLC   | 10. Pool name or Wildcat                     |  |
| 3. Address of Operator<br>5847 SAN FELIPE ST SUITE 3000 HOUSTON, TX 77057  | PECOS SLOPE; ABO                             |  |
| 4. Well Location   |  |  |
| Unit Letter <u>G</u> : <u>1980</u> feet from the <u>NORTH</u> line and <u>1980</u>   | ) feet from the EAST line                    |  |
| Section <u>30</u> Township <u>4S</u> Range <u>25E</u> NMPM County <u>CHAVES</u>  |  |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)3916' GR   |  |  |
| 12. 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. P AND A   PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB P  |  |  |
| OTHER:   |  |  |
| All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.  |  |  |
| Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.  |  |  |
| A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the   |  |  |
| <u>OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR</u>   |  |  |
| UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR<br>PERMANENTLY STAMPED ON THE MARKER'S SURFACE.  |  |  |
|  | *  |  |
| The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and   |  |  |
| other production equipment. Tras how   | t In Asture                                  |  |
| Anchors, dead men, the downs and risers have been cut off at least two feet below ground level.<br>If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with  |  |  |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed   |  |  |
| from lease and well location.  |  |  |
| All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have   |  |  |
| to be removed.)<br>All other environmental concerns have been addressed as per OCD rules.  |  |  |
| Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-   |  |  |
| retrieved flow lines and pipelines.  |  |  |
| If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well location, except for utility's distribution infrastructure.  |  |  |
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| When all work has been completed, return this form to the appropriate District office to schedule an inspection.   |  |  |
| SIGNATURE MANAGERINTENDENT DATE 11/26/19   |  |  |
| TYPE OR PRINT NAME C.M. BLOODWORTH, P.E. E-MAIL: m   | bloodworth@vnrenergy.com PHONE: 432-770-9738 |  |
| For State Use Only   | DENIED ec                                    |  |
| APPROVED BY:   | DATE /2/3/19                                 |  |
| Conditions of Approval (if any):   |  |  |

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| APPROVED BY:                   | لكظنا |
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| Conditions of Approval (if any | y):   |