Submit I Copy To Appropriate District Office	State of New Me	exico	Form C-1	.03
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Sistrict IV – (505) 476-3460 Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		Revised July 18, 2013	
			WELL API NO. 30-045-31672	
811 S. First St., Artesia, NM 88210			5. Indicate Type of Lease	
			STATE x FEE	
District IV - (505) 476-3460			6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505			E-504	
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.)		UG BACK TO A	7. Lease Name or Unit Agreement Nam ROSA UNIT	e
1. Type of Well: Oil Well Gas Well X Other			8. Well Number #338A	
2. Name of Operator			9. OGRID Number	
WPX ENERGY			120782	
 Address of Operator SOUTH MAIN AZTEZ NM 87410 			10. Pool name or Wildcat BASIN FC	
4. Well Location	7410		DASINTO	
i e	1315' feet from the N	line and \$55'	feet from theWline	
	ship 32N Range 06W	NMPM		
Section 32 Town	11. Elevation (Show whether DR)		Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z	4 7
	6303'			
12. Check A	Appropriate Box to Indicate N	lature of Notice, R	Leport or Other Data	
NOTICE OF IN	TENTION TO:	SURS	EQUENT REPORT OF:	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON				
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐				
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM		OTUED:		
		OTHER.	'	ك
			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.				
Due to Braden Head pressure, we wi				
		IOCD and will discus	s remediation plans with him. A follow	up
sundry well be submitted at the time of work being completed. Notify NMOCD Prior to begin			OIL CONS. DIV DIST. 3	
			hrs	
		prior to beginni operations	JAN 0 8 2015	
•			V O , E O 13	
Spud Date:	Rig Release Da	ate:		
	<u></u>			
I hereby certify that the information	above is true and complete to the be	est of my knowledge	and belief.	
SIGNATURE WALLEY I THE	TLE_PERMIT TECH III	DATE 1/7/15	_	
Type or print name LACE VGRANI	LLO_ E-mail address: LACEY.GI	RANILLO@WPXEN	ERGY.COM_ PHONE: 333-	
1816 For State Use Only				
Tot State Ose Only		TY OIL & GAS		
APPROVED BY:	TITLE	DISTRICT	#3 DATE 1-12-15	
Conditions of Approval (if any)	All N	•	,	