| Submit One Copy To Appropriate District   | State of New Me                        | exico          | Form C-103                               |                          |
|---|--|----------------|--|--------------------------|
| Office<br>District I<br>1635 N. French Dr., Ushba, NM 88240   | Energy, Minerals and Natural Resources |                | Revised November 3, 2011<br>WELL API NO. |                          |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II  | OIL CONSERVATION DIVISION              |                | 30-045-08/85                             |                          |
| 811 S. First St., Artesia, NM 88210<br>District III   | 1220 South St. Francis Dr.             |                | 5. Indicate Type<br>STATE                | of Lease                 |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV   | Santa Fe, NM 87505                     |                | 6. State Oil & G                         |                          |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505  | ·                                      |                |  |                          |
| SUNDRY NOTIC<br>(DO NOT USE THIS FORM FOR PROPOSA   | ES AND REPORTS ON WELLS                |                | · · · -                                  | or Unit Agreement Name   |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH<br>PROPOSALS.)<br>1. Type of Well: Dil Well Das Well Other 75 State 2 New Mey 8. Well Number  |  |                |  |                          |
| 1. Type of Well: Dil Well Gas Well Other / State O Dew Mell Number  |  |                |  |                          |
| 2. Name of Operator Rose Resort LLC DBAKOA Kumpground 9. OGRID Number 215351  |  |                |  |                          |
| 1900 E Blanco & Va  | Bloomfield NN                          | 1 87413        | 10. Pool name o<br>Bloomfield            | r Wildcat<br>Far Mington |
| 4. Well Location<br>Unit Letter <u>0</u> : <u>241</u> feet from the <u>S</u> line and <u>438</u> feet from the <u>F</u> line  |  |                |  |                          |
| Section 14 Township 2910 Range 1110 NMPM County San Suan  |  |                |  |                          |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |  |                |  |                          |
| 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  |  |                |  |                          |
| ' 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  |  |                |  |                          |
| OTHER:  |  | Location is re |  |                          |
| All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.<br>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  |  |                |  |                          |
| 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</u><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.   |  |                |  |                          |
| Anchors, dead men, tie 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.<br>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.<br>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.   |  |                |  |                          |
| When all work has been completed, return this form to the appropriate District office to schedule an inspection.  |  |                |  |                          |
| Aleria.   |  | TY OIL & GA    |  |                          |
| SIGNATURE / / DUCK  |  | DISTRICT       | # 3                                      | DATE <u>5.20-15</u>      |
| TYPE OR PRINT NAME  | E-MAIL:                                |                |  | PHONE:                   |
| For State Use Only DEPUTY OIL & GAS INSPECTOR   |  |                |  |                          |
| APPROVED BY: 7 2 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 -  | TITLE                                  | DISTRICT       | #3                                       | _DATE 5-20-15            |
|   | 1 7                                    |                |  |                          |

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