OIL CONS. DIV DIST. 3

MAR 2 4 2017

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Submit One Copy To Appropriate District State of New Mexico	Form C-103
District I Energy, Minerals and Natural Resources	Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240 District II	WELL API NO. 30 -031 - 2048 4
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III 1220 South St. Francis Dr.	STATE FEE
District IV Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	11_ 1779
87505 SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	STATES
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	8. Well Number 6
1. Type of Well: QOII Well Gas Well Other 2. Name of Operator	9 OGRID Number
ENORDINE LLC	9. OGRID Number 1852,39
3. Address of Operator	10. Pool name or Wildcat
P.O. Box SOL ALBOLD UM	CHARD WASK MU
4. Well Location	-
Unit Letter \underline{A} : <u>330</u> feet from the \underline{N} line and $\underline{\mathcal{M}}$ feet from the $\underline{\mathcal{C}}$ line	
Section 28 Township 201 Range 910 NMPM County	MCKINLOY
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
11. Dietadon (Shoh Whither Dit, Mill, Mi, OK, Ch.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Da	ata
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	JOB []
OTHER: Decation is ready for OCD inspection after P&A	
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 p	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
OPPRATOR NAME LEASE NAME WELL NUMBER ADDINUMBER OUADTED/OUADTED LOCATION OP	
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QU	
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE.	
TERMANENTET STAME ED ON THE MANNEN S SORTAGE	
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 groun	
If this is a one-well lease or last remaining well on lease, the battery and pit location(s)	
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, produ from lease and well location.	uction equipment and junk have been removed
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have	
to be removed.)	
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	d 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 sche	adula an increation
When all work has been completed, recard uns form to the appropriate District other to sent	edule an inspection.
SIGNATURE A Place TITLE MANAGINE Monder DATE 3/10/17	
TYPE OR PRINT NAME IN LAMASCHE-MAIL: O HANDSH	4424 @ PHONE: 414-8548
For State Use Only	
For state Use Only	
APPROVED BY: Joint J. Killy TITLE Compliance	DATE 3/24/2017
Relased Per 3/9/2017 inspection	