OIL CONS. DIV DIST. 3

NOV 14 2017

Submit One Copy To Appropriate District Office	State of New Mexico		Form C-103
District I	Energy, Minerals and Natural Resources		Revised November 3, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	OH CONGERNATION PROPERTY.		30-039-23352
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	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 87505			Fee
	CES 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		Enchilada	
PROPOSALS.)		8. Well Number 1	
1. Type of Well: Oil Well Gas Well Other			
2. Name of Operator WPX Energy Company LLC		9. OGRID Number 120782	
3. Address of Operator		10. Pool name or Wildcat	
P.O. Box 640, Aztec NM 87410		Counselors Gallup DK	
4. Well Location			
Unit Letter <u>B</u> : <u>860'</u> feet from the <u>N</u> line and 1825' feet from the <u>E</u> line			
Section 16 Township 23N Range 6W NMPM County Rio Arriba			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
6856' Check Appropriate Poy to Indicate Nature of Natice Papert or Other Date			
2. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN	ΓENTION TO:	SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			
TEMPORARILY ABANDON		<u> </u>	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB
OTHER:		□ Location is re	ady 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 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			
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR			
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.			
Anchors, dead men, the downs and risers have been cut on at least two feet below ground level. 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			
			ction 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.) 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.			
When all work has been completed, return this form to the appropriate District office to schedule an inspection.			
When all work has been completed, re-	n infrastructure.		
	n infrastructure. turn this form to the appropriate Di	istrict office to sched	dule an inspection.
When all work has been completed, red SIGNATURE	n infrastructure. turn this form to the appropriate Di	istrict office to sched	
SIGNATURE SIGNATURE	n infrastructure. turn this form to the appropriate Di	istrict office to scheo	dule an inspectionDATE _11/14/17
	n infrastructure. turn this form to the appropriate Di	istrict office to scheo	dule an inspection.
TYPE OR PRINT NAME, Lacey Gran	n infrastructure. turn this form to the appropriate Di TITLE E-MAIL: _lacey.gr	Permit Techanillo@wpxenergy.c	DATE _11/14/17 com PHONE: _505-333-1816
SIGNATURE TYPE OR PRINT NAME Lacey Gra	n infrastructure. turn this form to the appropriate Di TITLE E-MAIL: _lacey.gr	Permit Techanillo@wpxenergy.c	dule an inspectionDATE _11/14/17