Submit 1 Copy To Appropriate District Office		State of New Mexico Energy, Minerals and Natural Resources		Form C-103 Revised July 18, 2013
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	1220 South St. Franci	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 8750	05	5. Indicate Type of Le STATE	ease FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Le ST NM L0-2986-1 / S	
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			7. Lease Name or Uni S. Blanco Coal 36	it Agreement Name
PROPOSALS.) 1. Type of Well: Oil Well ☐ Gas Well ☒ Other 2. Name of Operator DJR Operating, LLC FEB 1 0 000 1.3			8. Well Number 1	
2. Name of Operator DJR Operating, LLC			9. OGRID Number 371	838
3. Address of Operator PO BOX 1	56 Bloomfield, NM 87413	4110	10. Pool name or Wildo	at Basin Fruitland
4. Well Location Unit Letter L: 1546' feet from the SOUTH line and 1214' feet from the WEST line				
Section 36	Township 24N Range 08V		County San Juan	
	11. Elevation (Show whether DR, RI 6870' KB	KB, RT, GR, etc.)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF II PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM	NTENTION TO: (PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL	REMEDIAL WO COMMENCE DI CASING/CEME	RILLING PA	T OF: TERING CASING IND A
OTHER:		□ Location is	ready for OCD inspe	ection after P&A
13. Describe proposed or completed operations. (Clearly state all pertinent details, and 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.				
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				
If this is a one-well lease or last reterms of the Operator's pit permit and	d risers have been cut off at least two fee emaining well on lease, the battery and p closure plan. All flow lines, production is have been removed. Portable bases have	oit location(s) have bee equipment and junk ha	ive been removed from leas	se and well location.
	have been addressed as per OCD rules. n abandoned in accordance with 19.15.3	5.10 NMAC. All fluid	ls have been removed from	non-retrieved flow lines
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.				
	turn this form to the appropriate District	office to schedule an in	nspection.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE	TITLERe	gulatory	DATE_	2-7-18
Type or print name _Amy Archuleta E-mail address: _aarchuleta@djrllc.com PHONE: _505-632-3476 x201 For State Use Only Based on 2/5/18 Departy Oil & Gas inspector, District #3				
APPROVED BY: 0206	elltitle	DISTRICT #	DATE	2/16/18
Conditions of Approval (if any):	R			