Submit 1 Copy To Appropriate District State of New M	laviao	Form C-103
ffice Energy Minerals and Network Person		Revised July 18, 2013
<u>District 1</u> – (575) 393-6161 Energy, Minerals and Nat 1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II - (575) 748-1283 OIL CONSERVATION DIVISION 811 S. First St., Artesia, NM 88210 District III - (505) 334-6178 1220 South St. Francis Dr.		30-043-21185
		5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 Santa Fe, NM 87505		6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM		
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		Bonanza
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		
1. Type of Well: Oil Well 🛛 Gas Well 🖾 Other		8. Well Number 14
2. Name of Operator		9. OGRID Number
DJR Operating, LLC 3. Address of Operator		371838 10. Pool name or Wildcat
PO BOX 156 Bloomfield, NM 87413		Lindrith Gallup Dakota West
4. Well Location		
Unit Letter J - 2042' feet from the S line and 2010' feet from the E line		
Section 11 Township 22N Range 03W NMPM County Sandoval		
11. Elevation (Show whether D	R, RKB, RT, GR, etc.)	
7198	B' GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL		
PULL OR ALTER CASING MULTIPLE COMPL OWNHOLE COMMINGLE	CASING/CEMENT	JOB 🗌
CLOSED-LOOP SYSTEM		
OTHER:	OTHER:	
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.		
proposed completion of recompletion.		
DJR Operating, LLC will be using a closed loop system while completing this well.		
NM O C D		NMOCD
		NMO O D
MAR 3 0 2018		
DISTRICT III		
		99
Spud Date: 10-28-2014 Rig Release I	Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE		
Type or print name _Amy Archuleta E-mail address: _aarchuleta@djrllc.com PHONE: _505-632-3476 x201		
For State Use Only		
APPROVED BY: TITLE		DATE
Conditions of Approval (if any):		