Submit 1 Copy To Appropriate District	propriate District State of New Mexico		Form C-103
Office District I – (575) 393-6161	Energy Minerals and Natural Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	nch Dr., Hobbs, NM 88240		WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		<b>30-039-21794</b> 5. Indicate Type of Lease
District III - (505) 334-6178	1220 South St. Francis Dr.		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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			Myers
1. Type of Well: Oil Well 🛛 Gas Well 🗌 Other		8. Well Number #001	
2. Name of Operator		9. OGRID Number	
DJR Operating, LLC		371838	
3. Address of Operator		10. Pool name or Wildcat	
1 Road 3263 Aztec, NM 87410-9521		Chacra	
4. Well Location			
Unit Letter D - 1117' feet from the N line and 790' feet from the W line			
Section 35 Township 25N Range 03W NMPM County Rio Arriba			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
7156'			
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			
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DR			
CLOSED-LOOP SYSTEM		OTHER: RTP	X
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.			
DJR Operating, LLC has returned this well to production as of 5-22-18.			
NMOCD			
MAY 2 9 2018			
DISTRICT III			
DISTRICT TT			
Spud Date: 05-24-1978	Rig Release Date	e:	
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: aprohuleta@dirlla.com DLIONE: 505 622 2476 -201			
Type or print name _Amy Archuleta E-mail address: _aarchuleta@djrllc.com PHONE: _505-632-3476 x201 For State Use Only			
APPROVED BY: ACCEPTED FOR RECORD TITLE DATE			
Conditions of Approval (if any):			