Submit 3 Copies To Appropriate District Office District I - (575) 393-6161	State of New Mexico Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		Form C-103
District I - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 District III - (505) 334-6178 1000 Rio Brazos Rs., Aztec, NM 87410 District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505			Revised July 18, 2013 WELL API NO. 30-045-33010 5. Indicate Type of Lease STATE FEE X 6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.) 1. Type of Well: Oil Well	NOTICES AND REPORTS ON WELL DSALS TO DRILL OR TO DEEPEN OR PLUG B CATION FOR PERMIT" (FORM C-101) FOR SU X Gas Well Other	ACK TO A	FEE         7. Lease Name or Unit Agreement Name         SAMMONS         8. Well Number
<ol> <li>Name of Operator Hilcorp Energy Company</li> <li>Address of Operator</li> <li>382 Road 3100 Aztec, NM 87410</li> </ol>	)		9. OGRID Number 372171 10. Pool name or Wildcat FRC - BASIN CB::FRUITLAND COAL
4. Well Location Unit Letter O Section 32	Footage <b>490' FSL &amp; 1465' FEL</b> Township <b>030N</b> Range 11. Elevation (Show whether DR, RK <b>5498' GR</b>		AN JUAN COUNTY
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA			
NOTICE OF PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:	INTENTION TO: PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL	REMEDIAL WORK COMMENCE DRILI CASING/CEMENT	LING OPNS. P AND A
<ul> <li>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.</li> <li>This well was re-delivered on 4/25/2019 and produced natural gas and entrained hydrocarbons.</li> <li>Notes: REDELIVERY / WELL WAS SHUT-IN DUE TO ECONOMICS. ACOI WELL.</li> </ul>			
TP: 0       0         Meter No.:       3665030         Proj Type.:       REDELIVE         Spud Date:       10/8/20		Gas Co.: HAR e:	Numbers Rocd 19 Let 7-19
I hereby certify that the information above is true and complete to the best of my knowledge and belief.         SIGNATURE       TITLE         Operations/Regulatory Tech - Sr.       DATE         6/6/2019         Type or print name       Priscilla Shorty         E-mail address:       pshorty@hilcorp.com			
APPROVED BY:	red for record		DATE