| Submit One Come To Americanisto District | C | | F - C 100 |
|--|--|--------------------|--|
| Submit One Copy To Appropriate District Office | State of New Mexico | | Form C-103 |
| <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and Natural Resources | | Revised November 3, 2011 WELL API NO. |
| District II | OIL CONSERVATION DIVISION | | 30-045-05423 |
| District III | 1220 South St. Francis Dr. | | 5. Indicate Type of Lease STATE FEE □ |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV | Santa Fe, NM 87505 | | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM | | | E-6597 |
| 87505 SUNDRY NOTICES AND F | REPORTS ON WELLS | 3 | 7. Lease Name or Unit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | Central Bisti Unit |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | 8. Well Number | |
| 1. Type of Well: Oil Well Gas Well Other | | | #38 |
| 2. Name of Operator | | | 9. OGRID Number |
| DJR Operating, LLC 3. Address of Operator | | | 371838 10. Pool name or Wildcat |
| 1 Road 3263 Aztec, NM 87410 | | Bisti Lower Gallup | |
| 4. Well Location | | | • |
| A- Unit Letter 990 feet from the North line and 1090 feet from the East line | | | |
| Section 16 Township 25 North, Range 12 West, NMPM, San Juan County | | | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6229' GR | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | |
| | | | |
| NOTICE OF INTENTION PERFORM REMEDIAL WORK ☐ PLUG AND | ITO: DABANDON 🗆 | REMEDIAL WORK | SEQUENT REPORT OF: ALTERING CASING |
| TEMPORARILY ABANDON CHANGE | | COMMENCE DRIL | |
| PULL OR ALTER CASING MULTIPLE | | CASING/CEMENT | _ |
| | | | |
| OTHER: Description Descri | | | |
| 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 | | | |
| OPER LEGISLAND VALVE VELOCIALINE WELL MINUPER ARVANIANER OUT PEER OUT PEER LOCATION OF LINE | | | |
| 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. | | | |
| 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 | | | |
| OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production 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. | | | |
| 7 | Tr - r | | 2 9 2019 |
| SIGNATURE | TITLE | Land/Regulatory | DATE 6-21-19 |
| TYPE OR PRINT NAME Paul Lehrman E-MAIL: plehrman@djrllc.com PHONE: 505-632-3476 | | | |
| APPROVED BY: Deputy Oil & Gas Inspector, SAU-2019 | | | |
| APPROVED BY: | TITLE | District | s Inspector, SAu-2019 |
| Conditions of Approval (if any): | - PY | | |