## ALL ABOVE GROUND FLOW LINES MUST BE REMOVED

ALL BURIED LINES MUST BE PROPERLY ABANDONED

OCD - Artesia - REC'D 6/10/2020

Submit One Copy To Appropriate District Office	State of New Mexico	Form C-103
1625 N. French Dr., Hobbs, NM 88240	ergy, Minerals and Natural Resources	Revised November 3, 2011 WELL API NO. 20,005, 62247
District II 811 S. First St., Artesia, NM 88210 OI	L CONSERVATION DIVISION	WELL API NO. 30-005-63247
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	5. Indicate Type of Lease  STATE X FEE
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		25891
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WILLOW SPRING 33 STATE
1. Type of Well: Oil Well X Gas Well Other		8. Well Number 001
2. Name of Operator RELIANCE ENERGY, INC.		9. OGRID Number
3. Address of Operator		149441 10. Pool name or Wildcat
300 N. MARIENFELD, STE 1100, MIDLAND TX 79701		Pecos Slope; ABO (Gas)
4. Well Location		
Unit Letter L: 1980 feet from the S line and 660 feet from W line		
Section 33 Township 4S Range the 25E NMPM County Chaves  11. Elevation (Show whether DR, RKB, GR, etc.)		
3581' GR		
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 ALTERING CASING		
		RILLING OPNS. P AND A
PULL OR ALTER CASING   MULTIP	LE COMPL CASING/CEME	NT JOB
OTHER:   Location is ready for OCD inspection after P&A		
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 production equipment. Flow lines not removed		
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. Anchors not removed  All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have		
to be removed.) Buried plastic liner not removed - trash not 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 infrastr	ructure.	
When all work has been completed, return this	form to the appropriate District office to so	hedule an inspection.
SIGNATURE & LANGE		
SIGNATURE Hodsy Luna	TITLE Regulatory Mana	ager DATE 6/09/2020
TYPE OR PRINT NAME Betsy Luna	E-MAIL: bluna@reimid.	com PHONE: 432-683-4816
For State Use Only		
APPROVED BY:	DENIED	DATE GC 6/18/2020