Submit 1 Copy To Appropriate District BBS OCDState of New Mexico Office	Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 SEP 0 2 2016 CONSERVATION DIVISION	Revised July 18, 2013 WELL API NO.
OLL OF THE ALL STREET	30-025-01122
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 8 RECEIVE 220 South St. Francis Dr. District IV – (505) 476-3460 Santa Fe, NM 87505	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 8 RECEIVED Santa Fe, NM 87505	STATE X FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	LG2612
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.)	Saunders 10 St (307908)
1. Type of Well: Oil Well X Gas Well Other	8. Well Number 002
Name of Operator G&G Oil and Gas LLC /	9. OGRID Number 272664
3. Address of Operator	10. Pool name or Wildcat
c/oOil Reports & Gas Services, Inc 1008 W Broadway, Hobbs, NM 88240	Saunders; Permo Upper Penn (55120)
4. Well Location Unit Letter J: 1980 feet from the SOUTH line and 1980 feet from the EAST line	
Section 10 Township 14S Range 33E	NMPM LEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc.	
4202' GL	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	
	ILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN DOWNHOLE COMMINGLE	11 308
CLOSED-LOOP SYSTEM	
OTHER: OTHER:	d cive mentioent detectionally disconstituented data
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.	
1. MIRU. PU.	
2. POOH W/PROD EQUIP	
3. SET CIBP @ 9852', 50' ABOVE TOP PERF	
4. LOAD HOLE W/PKR FLUID, TEST TO 500#, HOLD FOR 30 MIN	
Condition of Approval: notify	
OCD Hobbs office 24 hours	
prior of running MIT Test & Chart	if any or the first of the same of the sam
The second secon	The state of the s
Soud Date:	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
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SIGNATURE HEARD TITLE AGENT	DATE 08/29/16
Type or print name GAYE HEARD E-mail address: gheard@oilrep	ortsinc.com PHONE: 575-393-2727
For State Use Only	
APPROVED BY: Y CALLY DIOWHETLE DEST Super isoldate 9/7/2016	
Conditions of Approval (if any):	