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Submit 1 Copy To Appropriate District Office District 1 – (575) 393-6161 HOBBS OCDState of New Mexico Energy, Minerals and Natural Resources	EVP Form C-103 Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
811 S. First St., Artesia, NM 88210 AV OIL CONSERVATION DIVISION	30-025-28514 5. Indicate Type of Lease
District III - (505) 334-6178 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 RECEIVED Santa Fe, NM 87505	STATE X FEE 6
District IV - (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
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.)	State A A/C 1
1. Type of Well: Oil Well Gas Well X Other WIW	8. Well Number 119
2. Name of Operator Merit Energy Company	9. OGRID Number 14591
3. Address of Operator 13727 Noel Rd. Suite 1200	10. Pool name or Wildcat
Dallas, Texas 75240	Langlie Mattix SR-Q-GB
4. Well Location Unit Letter P : 1295 feet from the South line and 129	5 feet from the East line
Section 3 Township 23S Range 36E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.,	
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 WOR	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMEN DOWNHOLE COMMINGLE Image: Commingle Comming	ТЈОВ 🗌
OTHER: OTHER: Return to	active status
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.	
Returned well to active status 08/01/2014	
Current rate: 107 BWPD on vac.	
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	11 test
Charlinzpill	
	Chart test 2/4/2014 2/4/2014
	OF. WUSH
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Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE THE Moon TITLE Regulatory Manager DATE 08/19/2014	
Type or print name Lynne Moon E-mail address: lynne.moon@meritenergy.com PHONE: (972)628-1569 For State Use Only 1 1 1	
APPROVED BY: Malufflown TITLE Dist. Supervise DATE 8/19/2014	
Conditions of Approval (if any)	
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