State of New MEXICO   State of New MEXICO   State of New MEXICO   District	Submit One Cont. To Annual In Division	A A A A A A A A A A A A A A A A A A A	OCD	
ORDING CONTROL   ORDI		State of New Mexico	· · · · · · · · · · · · · · · · · · ·	Form C-103 Revised November 3, 2011
Silva St. Arasia, NM 8210   Santa Fe, NM 87305	1625 N. French Dr., Hobbs, NM 88240	NOV 1	4 2014 WELL API NO.	
1220 SOURT St. PTAIRGCENED   STATE   FEE   SOURCE   FEE   FEE   SOURCE   FEE   FEE   FEE   SOURCE   FEE	811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIV	ISION 30-025-0696	
SUNDRY NOTICES AND REPORTS ON WELLS   The Lease Name or Unit Agreement Name   Hugh Corrigan			STATE STATE	FEE X
SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FERRIT" (PROPOSALS)  1. Type of Well:	District IV	Santa Fe, NM 87505	6. State Oil & C	Gas Lease No.
GONOTUSE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOR. USE "APPLICATION FOR PREMIT" (FORM C-101) FOR SUCH PROPOSALS.)  1. Type of Well:   Gold Well   Gas Well   Other   S. Well Number #1    2. Name of Operator Vanguard Permian LLC   9. OGRID Number 227588    3. Address of Operator   10. Pool name or Wildcat   10. Pool name or Wild	87505			
1. Type of Well:	(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		TK TO A	
3. Address of Operator   10. Pool name or Wildeat   Drinkard	1. Type of Well: XIOil Well Gas Well Other		8. Well Number	r #1 —
3. Address of Operator   10. Pool name or Wildeat   Drinkard	2. Name of Operator Vanguard Permian LLC		9. OGRID Num	ber 227588
4. Well Location			10. Pool name of	or Wildcat
Unit Letter   1800   feet from the South   line and   515   feet from the East   line   Section   33   Township   215   Range   37E   NMPM   County LEA	· •	Houston, TX 77057	•	1
Section 33 Township 21S Range 37E NMPM County LEA  11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3442' GR  12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data    NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:	f	0		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3442 GR				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data    NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:   REMEDIAL WORK   ALTERING CASING   TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS   PAND A   CASING/CEMENT JOB   PAND A   OTHER   All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.   A steel marker at least 4" in diameter and at least 4" above ground level has been set in concrete. It shows the		1. Elevation (Show whether DR, RKB.		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS ALTERING CASING COMMENCE DRILLING OPNS PAND A CASING/CEMENT JOB CASING/CEMEN	12 Chack Appropriate Day to In		or Other Date	
PERFORM REMEDIAL WORK				
PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB  OTHER.  Decation is ready for OCD inspection after P&A  OTHER.  Decation is ready for OCD inspection after P&A  Location is ready for OCD inspection and closure plan. All flow lines, production and plan location is properly abandoned in concerns have been removed. (Poured onsite concrete bases do not have to be removed.)  All metal bolts and other materials have been adardoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from no				
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   OTHER:		CHANGE PLANS	MENCE DRILLING OPNS	
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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.  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.	्राप्तक प्रदेश स्थापन । एक भ्रम्भा अक्षेत्रे अक्ष्रा । क्ष्म		Appet a setting of the state of	
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When all work has been completed, return this form to the appropriate District office to schedule an inspection.	When all work has been completed, return	rn this form to the appropriate District	office to schedule an inspection	n.
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TYPE OR PRINT NAME MIKE JOWES E-MAIL: PHONE:	TYPE OR PRINT NAME WILL	Jowes E-MAIL:	,	PHONE:
For State Use Only	For State Use Only	),		
APPROVED BY: Was Withday TITLE Compliance Officer DATE 11/17/2014 Conditions of Approval (if any):		TITLE CONC	Diance Officer	DATE 11/17/2014
NOV 1 8 2014 W	Conditions of Approval (II arry).			VV