| Submit 1 Copy To Appropriate District Office  | Ctata of No.                                     | v Movies                                |  | Form C-103   |
|---|--|---|--|--|
| District I  | State of New<br>Energy, Minerals and             |   | WELL API NO.                               | Revised November 3, 2011   |
| 1625 N. French Dr., Hobbs, NM 88240   | Energy, will ordina and                          | rvatarar resources                      |  | 25-41375   |
| District II<br>811 S. First St., Artesia, NM 88210  | OIL CONSERVAT                                    | TION DIVISION                           | 5. Indicate Type of L                      |  |
| Disrtict III  |  |   | STATE                                      |  |
| 1000 Rio Brazos Rd. Aztec, NM 87410   | 1220 South St.                                   |   |  |  |
| <u>District IV</u><br>1220 S. St. Francis Dr., Santa Fe, NM   | Santa Fe, N                                      | M 87505                                 | 6. State Oil & Gas Le                      | ease No.   |
| 87505   |  |   |  |  |
| SUNDRY NOTICES A  | AND REPORTS ON WEL                               | SRRS OCD                                | 7. Lease Name or U                         | Init Agreement Name  |
| (DO NOT USE THIS FORM FOR PROPOSA<br>A DIFFERENT RESERVIOR. USE "APPLIC   | CATION FOR PERMIT" (FOR                          | RM C-101) FOR                           | State "                                    | C" Tract 12  |
| SUCH PROPOSALS.)  | ATTION ON ELIMINATION                            |   | 8. Well Number                             |  |
| 1. Type of Well: Oil Well  Gas Well   | ☑ Other  |   | 1 - 1                                      | 1H   |
| 2. Name of Operator   | Composition                                      | RECEIVED                                | 9. OGRID Number                            | 873  |
| 3. Address of Operator  | Corporation                                      |   | 10. Pool Name                              | 8/3  |
| 303 Veterans Airpark Lane, Ste. 3000, Midland, TX 70705   |  |   |  | dded Well  |
| 4. Well Location  |  |   |  |  |
| Unit Letter D :<br>Section 16   | 330 feet from the Township 21S R                 | N line and                              | 330 feet from th                           | The second secon |
|   | Township <b>21S</b> R Elevation (Show whether Di |   | NMPM                                       | County Lea   |
|   | · ·  | 4' GR                                   |  |  |
| 12. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data   |  |   |  |  |
| 12. Check Appropriate Box 10 indicate   | rvature of rvotice, report,                      | of Other Data                           |  |  |
| NOTICE OF INTE  | NTION TO:  |   | SUBSEQUENT RI                              | EPORT OF:  |
|   |  | EMEDIAL WORK                            | ALTERING                                   |  |
|   |  | OMMENCE DRILLING OF<br>ASING/CEMENT JOB | PNS. PANDA                                 | ☑ /  |
| I SEE STAFFET GASING  | I I I I I I I I I I I I I I I I I I I            | AOINO/OLINENT TOB                       | _  |  |
| OTHER.  |  | I continue                              |  |  |
| OTHER:  All pits have been remediated in compliance.  | e with OCD rules and the terms                   |   | eady for OCD inspectinit and closure plan. | on after P&A   |
| 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 the 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 the 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 concrens have been addressed as per OCD rules.  |  |   |  |  |
| Pipelines and flow lines have been abandoned in accordance with 19.15.9.714.B(4)(b) NMAC. All fluids have been removed from non-retrieved flow lines and pipelines.   |  |   |  |  |
|   |  |   |  |  |
| When all work has been completed, return  | this form to the appropriate Dist                | rict office to schedule an i            | nspection.                                 |  |
| 1. 1  |  |   |  |  |
| SIGNATURE SHAWN KIN   | uhs TITLE  | Reclamation Fore                        | eman DATE                                  | 3-1-16   |
|   |  |   |  |  |
| TYPE OR PRINT NAME Guinn R  | urks E-MAIL g                                    | uinn.burks@apached                      | corp.com PHONE:                            | 432-556-9143   |
| For State Use Only  | ILL T  | ES                                      |  | 10/10/10/11  |
| APPROVED BY:  | TITLE T  | .E.J.                                   | DATE                                       | 03/10/2016   |
| Conditions of Approval (if any):  |  |   |  | G89  |
|   |  |   |  |  |