Submit One Copy To Appropriate District State of New Mexico	Form C-103			
Office <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Energy, Minerals and Natural Resources	Revised November 3, 2011 WELL API NO.			
District II 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-025-02171			
District III 1220 South St. Francis Dr.	 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No. 002360 			
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505				
1220 S. St. Francis Dr., Santa Fe, NM				
87505 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 Vacuum Unit			
1. Type of Well: Oil Well Gas Well Other - Injection OBBS OCD	8. Well Number 9			
2. Name of Operator	9. OGRID Number			
Burgundy Oil & Gas of New Mexico, Inc.	003044			
3. Address of OperatorMAT9 2010401 W. Texas Ave., Suite 1003 Midland, TX 79701	10. Pool name or Wildcat Vacuum; Grayburg-San Andres			
4. Well Location RECEIVED	vacuum, Grayburg-Ban Andres			
4. Well Location Unit Letter \underline{G} : 1980 feet from the North line and 1980 feet from the East line				
Section 32 Township 17S Range 34E NMPM County Lea				
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
4074' GL				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other D	ata			
NOTICE OF INTENTION TO: SUB				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A				
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB				
OTHER: Compliance with OCD rules and the terms of the Oper	ady for OCD inspection after P&A ^V			
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				
OPEDATOD NAME I FACE NAME WELL NUMBED ADINUMBED OU	ABTED OU ABTED LOCATION OD			
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QU UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATIO				
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.				
The least in her here leveled as nearly as nearly to minimal ground contains and here l	hear alased of all inclutions flow lines and			
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 group	nd 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.	ved. (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. 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 infrastructure.	Thies have been removed itom lease and wen			
When all work has been completed, return this form to the appropriate District office to sche	edule an inspection.			
and I D' dall more a side	DATE 05/02/2016			
SIGNATURE	tantDATE05/03/2016			
TYPE OR PRINT NAMECindy K. CampbellE-MAIL:ccampbell.bogi@	@att.net PHONE: _432-684-4033_			
For State Use Only				
APPROVED BY: Markhitchen TITLE P.E.S.	DATE 6/8/2016			
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DATE	6/2	3/	201	6