Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 Energy, Minerals and Natural Resources	Form C-103 Revised July 18, 2013
District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-025-04017
District III - (505) 334-6178 AUG 2 9 201220 South St. Francis Dr.	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM RECEIVED	B-10268
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.)	Northwest Eumont Unit
1. Type of Well: Oil Well Gas Well Other	8. Well Number 116
Name of Operator Rhombus Operating Co. Ltd.	9. OGRID Number 19111
3. Address of Operator P.O. Box 627, Littleton, CO 80160-0627	10. Pool name or Wildcat Eumont Yates 7-River Queen
4. Well Location	
Unit Letter M : 660 feet from the West line and 66	
Section Township Range	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	
E PERMITTING SWD IN JECTIONS SUBSEQUENT REPORT OF:	
E-PERIVIT TING SAVD INSECTION	
CONVERSION RBDWIS COMMENCE DRILLING OPNS D PAND A	
RETURN TO TA CASING/CEMENT JOB	
CSNG ENVIROCHG LOC Perform mechanical integrity test on TA'd well	
INT TO PA P&A NRP&A R	
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.	
proposed completion of recompletion.	
Pressured up to >500 psi for >30 minutes. Rhombus is requesting that the TA'd status for this well be renewed Chart attached	
This Approval of Temporary	
Abandonment Expires 8/10/2017	
0/10	1 months
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
Thereby certify that the information above is true and complete to the best of my knowledge and benefit.	
SIGNATURE Cudy Sloge TITLE admin asst. DATE 8/10/16	
Type or print name Cindy Grogo E-mail address: amail , com PHONE: 432-683-8873	
For State Use Only	
ADDROVED BY VI ARELANDED THE SURPLY S	
APPROVED BY: DATE DISCONDITION OF APPROVED BY: DATE DATE DISCONDITION OF APPROVED BY: DATE DATE DATE DATE DATE DATE DATE DATE	

