Submit One Copy To Appropriate District State of New Me	xico Form C-103
Office District I District I District I	ral Resources Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II 811 S. First St., Artesia, NM 882107 OIL CONSERVATION District III 1220 South St. Fran	5. Indicate Type of Lease
1220 Bottin St. 11411	STATE STATE FEE
1220 S. St. Francis Dr., Santa Fe, NM	B-2317
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 PLU DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FO PROPOSALS.)	OR SUCH
1. Type of Well: ⊠Oil Well ☐ Gas Well ☐ Other	8. Well Number 20
2. Name of Operator MCGOWAN WORKING PARTNERS, INC.	9. OGRID Number 220397
3. Address of Operator P.O. BOX 55809, JACKSON MS 39296-5809	10. Pool name or Wildcat VACUUM GB/SA
4. Well Location	
Unit Letter J: 1926feet from the SOUTH line and 2430feet from the EASTline	
Section 35 Township 17S Range 34E NMPM <u>LEA</u> County NM 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 ☐ TEMPORARILY ABANDON ☐ CHANGE PLANS ☐	REMEDIAL WORK ☐ ALTERING CASING ☐ ' COMMENCE DRILLING OPNS.☐ P AND A ☐
PULL OR ALTER CASING MULTIPLE COMPL	CASING/CEMENT JOB
OTHER:	
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	
ODED ATOD NAME I FACE NAME WELL NUMBED ADLAUMDED QUADTED/QUADTED LOCATION OD	
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.	
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.	
When all work has been completed, return this form to the appropriate District office to schedule an inspection.	
SIGNATURE Jack Stevenson TITLE 1	DATE 4-18-2017
TYPE OR PRINT NAME JACK STEVENSON E-MAIL:	PHONE:
SIGNATURE Jack Stevenson TITLE Pumper DATE 4-19-1-017 TYPE OR PRINT NAME Jack STevenson E-MAIL: For State Use Only APPROVED BY: TITLE DATE 4-19-1-017 PHONE: PHONE: DATE 02/03/2005	
APPROVED BY:TITLE	DATE 02/03/2005