District I – (575) 393-6161 Energy, Minerals and Natural Resources	Revised July 18, 2013
District I - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283 OIL CONSERVATION DIVISION District III - (595) 334-6178 LICLY A proof 220 South St. Francis Dr.	WELL API NO.
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	5. Indicate Type of Lease
1000 Bio Branco Bd. Artes NW 87410 NUV () 6 7 118 220 South St. Francis Df.	STATE A FEE
District IV – (505) 476-3460 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
District IV – (505) 476-3460 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	STATE 27
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Other	8. Well Number / (135 L) 28)
	9. OGRID Number
3. Address of Operator 3. Address of Operator	376661
1 A*	10. Pool name or Wildcat
A.O. BOX 250 LOVINGTON MM	Brine (96173)
4. Well Location Unit Letter \angle : 1980 feet from the $$ line and $$ line $$ feet from the $$ line	
Section 27 Township 165 Range 33 L NMPM County Len	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
420)	
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 REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS.☐ P AND A ☐	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
DOWNHOLE COMMINGLE	
CLOSED-LOOP SYSTEM DO BRIVE WELL DOTHER: COMPLETE TO BRIVE WELL DOTHER:	
13. Describe transced 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.	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Lipud Will Aif up To Complete Well Bone Lipud Will Aif up To Complete Well Bone Fo Brine Beneration Service pen For Brine Approved Plans outlined in nmoch Brine Approved Alans outlined in nmoch Brine Approved Assurable Service Assurable Service Approved Assurable Service Approved Assurable Service Assurable Service Approved Assurable Service Approved Assurable Service Assurable Service Approved Assurable Service Assurable Service Approved Assurable Service Assurable Service Assurable Service Assurable Service Assurable Service Approved Service Assurable Service As	
Jenenation Service per	
To BRINE	
MAMPUEN PLANS DUTLINES	
nermit BSW030	
<u> </u>	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
000 - 7	
SIGNATURE //alless Surrous TITLE AGENT JON DATE 11/3/18	
SIGNATURE MARNIN BURKOWS E-mail address & SMHL, COM PHONE: 631-8067	
For State Use Only	
Conditions of Approval (if any):	