Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103 Revised July 18, 2013
Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	Minerals and Natural Resources	WELL API NO.
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 DEC 1 2 2018 C	ONSERVATION DIVISION	30-025-43543 5. Indicate Type of Lease
District III – (505) 334-6178	220 South St. Francis Dr.	STATE FEE
<u>District IV</u> – (505) 476-3460 RECEIVEL 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND RE		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL DIFFERENT RESERVOIR. USE "APPLICATION FOR PE PROPOSALS.)	RMIT" (FORM C-101) FOR SUCH	Caza Ridge 14 State
1. Type of Well: Oil Well 🔳 Gas Well 🗌	Other	8. Well Number 6H
2. Name of Operator Caza Oil and Gas, Inc		9. OGRID Number 249099
3. Address of Operator		10. Pool name or Wildcat
200 N. Lorraine St #1550., Midland, TX		Antelope Ridge Bone Spring West
Unit Letter O : 210 feet from the south line and 2545 feet from the line		
Section 14 To	ownship 23S Range 34E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3378' GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION	TO: SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND	ABANDON ☐ REMEDIAL WOR	K ☐ ALTERING CASING ☐
TEMPORARILY ABANDON	- 1	
DOWNHOLE COMMINGLE	GAGING/GENIEN	
CLOSED-LOOP SYSTEM OTHER:	▼ OTHER:	П
13. Describe proposed or completed operation	ns. (Clearly state all pertinent details, and	d 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.		
Caza proposes to extend the APD		extension approved. Expires 1-21-2020. ther extensions will be approved.
	140 Jun	Ther extensions will be approved.
	_	
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	TITLE Contract Engine	er _{DATE} 12/12/2018
Steve Moris	steve morris@m	201 2021
Type or print name For State Use Only	E-mail address:	PHONE: 432-201-3031
The state of the s		
APPROVED BY: Source (Draw) (Draw):	D TITLE Staff Myn	DAIE/&-/&-/0