Submit One Copy To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
District II 811 S. First St., Artesia, NM 88210  ORD CONSERVATION DIVISION		30-025-43277
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	5. Indicate Type of Lease  STATE ☐ FEE ☒
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505  QLD DD WYSERVER	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505 St. Francis Dr., Santa Fe, NM 2	20.	
SUNDRY NOTICES AND ALPPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSATION DEFINED TO DEEPEN OR PLUG BACK TO A  DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		7. Lease Name or Unit Agreement Name Paduca 6
PROPOSALS.)  1. Type of Well:  Oil Well  Gas Well  Other SWD		8. Well Number 1
2. Name of Operator MESQUITE SWD, INC.		9. OGRID Number 161968
3. Address of Operator		10. Pool name or Wildcat
PO BOX 1479, CARLSBAD NM 88221-1479		SWD;Devonian (96101)
4. Well Location		
Unit Letter 3: 2650 feet from the SOUTH line and 1220 feet from the WEST line		
Section 6 Township 26S Range 32E NMPM EDDY County NM		
11. Elevation (Show whether DR, u RKB, RT, GR, etc.)		
		3285' GR
12. Check Appropriate Box to In	dicate Nature of Notice, Report or Other	Data
NOTICE OF INTE	ENTION TO:	DSECUENT DEDODT OF
NOTICE OF INTENTION TO: SUB PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WOR		BSEQUENT REPORT OF: $ $ RK $ $ ALTERING CASING $ $
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A		
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   AND A		
	J. S.	T RIVE
OTHER:		ready for OCD inspection after P&A
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		
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.		
<ul> <li>□ Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.</li> <li>□ 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</li> </ul>		
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		and times have been removed from lease and wen
iodation, except for armey 5 distribution	initusa actare.	
When all work has been completed, return this form to the appropriate District office to schedule an inspection.		
SIGNATURE <i>Melanie</i> <u>G.</u>	Wilson TITLE Regulatory Analys	DATE 01/25/2019
TYPE OR PRINT NAME Melanie.  For State Use Only		<del>_</del>
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APPROVED BY: Kerry 70	Ther TITLE Compliance	0///wen H DATE 1-28-19
Conditions of Approval (if apy):		