Submit One Copy To Appropriate District Office District I 1625 N. French Dr., Hobbs, NM 88240 State of New Mexico Office District I 1625 N. French Dr., Hobbs, NM 88240	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	S Revised November 3, 2011 WELL API NO.
District II 811 S. First St., Artesia, NM 88210 FEBOIL4 CONSERVATION DIVISION	30-025-23621
District III 1220 South St. Francis Dr.	5. Indicate Type of Lease STATE ☐ FEE ☒
1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr. Santa Fe, NM	6. State Oil & Gas Lease No.
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	Hobbs State
PROPOSALS.) 1. Type of Well: ☐Oil Well ☐ Gas Well ☒ Other SWD	8. Well Number 3
2. Name of Operator	9. OGRID Number
MESQUITE SWD, INC. 3. Address of Operator	161968 10. Pool name or Wildcat
PO BOX 1479, CARLSBAD NM 88221-1479	SWD;Devonian (96101)
4. Well Location	
Unit Letter B : 990 feet from the NORTH line and 1830 feet from the EAST line	
Section 29 Township 18S Range 38E NMPM LEA County NM 11. Elevation (Show whether DR, u RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
1	
	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/CE	
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	
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.	
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 Melanie J. Wilson TITLE Regulatory An	alyst DATE <u>02/04/2019</u>
TYPE OR PRINT NAME Melanie J Wilson E-MAIL: mjp1692@gmail For State Use Only	.com PHONE: <u>575-914-1461</u>
	2/15 1 - 2 / 18
APPROVED BY: Kerry Juta TITLE Compliant Conditions of Approval (if any):	edffin A DATE 2-6-19