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Submit One Copy To Appropriate District Office District I 1625 N. French Dr., Hobbs, NM 8824000 District II 811 S. First St., Artesia, NM 88210  State of New Mexico State of New Mexico Minerals and Natural Resources CONSERVATION DIVISION		Form C-103		
		Revised November 3, 2011 WELL API NO.		
		30-025-11220		
811 S. First St., Artesia, NM 88210  District III  South St. Francis Dr.		5. Indicate Typ		
District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		STATE 6. State Oil & 0	Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505		321534		
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 PROPOSALS.)			LANGLIE MATTIX UNIT	
1. Type of Well: Oil Well Gas Well Other		8. Well Number	010	
2. Name of Operator MAMMOTH EXPLORATION LLC		9. OGRID Number 372233		
3. Address of Operator		10. Pool name or Wildcat		
200 N. LORAINE ST., STE. 1100, MIDLAND, TX 79701				
4. Well Location				
Unit Letter P: 660 feet from the S line and 660 feet from the E line  Section 23 Township 24S Range 37E NMPM County LEA				
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3,171'- GL				
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			ALTERING CASING	
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB			V 7	
		_	\p.	
OTHER:     \times \text{ Location is ready for OCD inspection after P&A} \text{ 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				
<u>UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR</u> PERMANENTLY STAMPED ON THE MARKER'S SURFACE.				
TERMANENTET STAMTED ON THE MARKER SOURFACE.				
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 HALP	TITLE REGULATORY MAN	AGER	DATE 1/7/2019	
TYPE OR PRINT NAME GRIFFIN HAYS	E-MAIL: griffin@mammothe	exp.com	PHONE: 432-305-0953	
For State Use Only	<u> </u>			
APPROVED BY: Kerry Furter	TITLE CONSIDER	00000	ADATE 2-11-19	
J. J		very !	4 DATE 2-11-19	