	ubmit 1 Copy To Appropriate District State of New Mexico			Form C-103	
Office District I – (575	ce rict I – (575) 393-6161 Energy, Minerals and Natural Resources		ral Resources	Revised July 18, 2013	
	25 N. French Dr., Hobbs, NM 88240			WELL API NO.	
<u>District II</u> – (57: 811 S. First St.,	Artesia, NM 88210	OIL CONSERVATION DUCKION		30-025-06154 5. Indicate Type of Lease	
District III - (505) 334-6178 1220 South St. Francis Dr.			cis Dr.	STATE \square FEE \square	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV - (505) 476-3460 Santa Fe, NM 97505			6. State Oil & Gas Lea	/	
1220 S. St. Francis Dr., Santa Fe, NM 87505			071031621B		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BOOTO A					
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR CH PROPOSALS.)				BRITT B-18	
1. Type of Well: Oil Well 🔲 Gas Well 🛛 Other				8. Well Number #3	
2. Name of Operator SOUTHWEST ROYALTIES, INC.				9. OGRID Number 21355	
3. Address of Operator				10. Pool name or Wildcat EUMONT;	
P.O. BOX 53570; MIDLAND, TEXAS 79710				YATES-7 RVRS-QUEEN (GAS)	
4. Well Location					
Uni	t LetterJ:_19				
Sect	tion 18 T	<u> </u>			unty
		11. Elevation (Show whether DR 354	,		
L				ł	
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					
CLOSED-LO		_			_
OTHER:			OTHER:		
13. Describe proposed 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.					
6/10	/19: Replaced moto	or. Load and test. Well back	on production.		
6/11-13/19: 10 mcfd, 1 bwpd					
	00/01/10				
Spud Date:	02/01/19	37Rig Release D	ate: 03	8/17/1937	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATUR	IL.	TITI E DEC	ULATORY ANA		06/12/2019
SIGNATURE					
Type or print name LINDS LIVESAY E-mail address: _llivesay@swrpermian.com PHONE: _432/207-3054					
For State Use Only					
APPROVED BY:					
Conditions of Approval (if any):					