

Submit 1 Copy To Appropriate District
Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS (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.)		WELL API NO. 30-005-63637
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Vanguard Operating LLC		6. State Oil & Gas Lease No.
3. Address of Operator 5847 San Felipe St., Suite 3000, Houston, TX 77057		7. Lease Name or Unit Agreement Name Cocktail Bar State Com
4. Well Location Unit Letter <u>E</u> : <u>1980</u> feet from the <u>North</u> line and <u>660</u> feet from the <u>West</u> line Section <u>1</u> Township <u>07S</u> Range <u>24</u> NMPM County <u>Chavez</u>		8. Well Number <u>1</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 4033		9. OGRID Number
		10. Pool name or Wildcat Pecos Slope; ABO

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

- 06/11/19 Notified OCD of MI P&A equipment.
- 06/12/19 Set 4 1/2" CIBP @ 3562'. Circ hole w/MLF from 3562'-surf. Spot 25 sx class "c" cmt from 3562'.
- 06/13/19 Tag TOC @ 3299'. Spot 25 sx class "c" cmt from 2980'-2880'. Perf @ 1692', m&p 120 sx class "c" cmt, tag @ 1350', perf @ 1006', m&p 65 sx class "c" cmt.
- 06/14/19 Tag TOC @ 900'. Perf @ 620', m&p 45 sx class "c" cmt, tag @ 518', perf @ 100', circulated hole w/50 sx class "c" cmt on 4 1/2" csg, 8 5/8" to surf. RD P&A equip, tag @ surf, back free location, P&A completed.

Approved for plugging of well bore only.
Liability under bond is retained pending receipt
of C-103 (Subsequent Report of Well Plugging)
which may be found at OCD Web Page under
Forms. www.emnrd.state.nm.us/oed.

RECEIVED

JUN 19 2019

DISTRICT II-ARTESIA O.C.D.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jimmy Bagley TITLE Agent DATE 06/17/2019

Type or print name Jimmy Bagley E-mail address: sunsetwellservice@yahoo.com PHONE: 432-561-8600

For State Use Only

APPROVED BY: [Signature] TITLE State Mgr DATE 6/19/19

Conditions of Approval (if any):