

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. <b>30-045-26810</b>
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 <b>DJR Operating, LLC</b>		6. State Oil & Gas Lease No. <b>V-2260</b>
3. Address of Operator <b>1 Road 3263 Aztec, NM 87410-9521</b>		7. Lease Name or Unit Agreement Name <b>Karen Hixon</b>
4. Well Location Unit Letter <u>A - 500'</u> feet from the <u>North</u> line and <u>400'</u> feet from the <u>East</u> line Section <u>36</u> Township <u>25N</u> Range <u>12W</u> NMPM County <u>San Juan</u>		8. Well Number <b>#001</b>
		9. OGRID Number <b>371838</b>
		10. Pool name or Wildcat <b>Bisti Lower Gallup</b>
		11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>6401' GL</b>

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <u>RTP</u> <input checked="" type="checkbox"/>	
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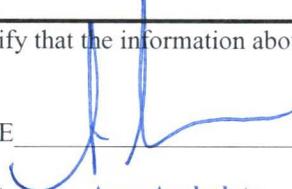
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

**DJR Operating, LLC has returned this well to production as of 12-1-2018.**

**NMOCD**  
**DEC 07 2018**  
**DISTRICT III**

Spud Date: 12-02-1987      Rig Release Date:  

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

SIGNATURE  TITLE Regulatory DATE 12-7-2018  
 Type or print name Amy Archuleta E-mail address: aarchuleta@djrlc.com PHONE: 505-632-3476 x201  
**For State Use Only**

APPROVED BY: ACCEPTED FOR RECORD TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): A