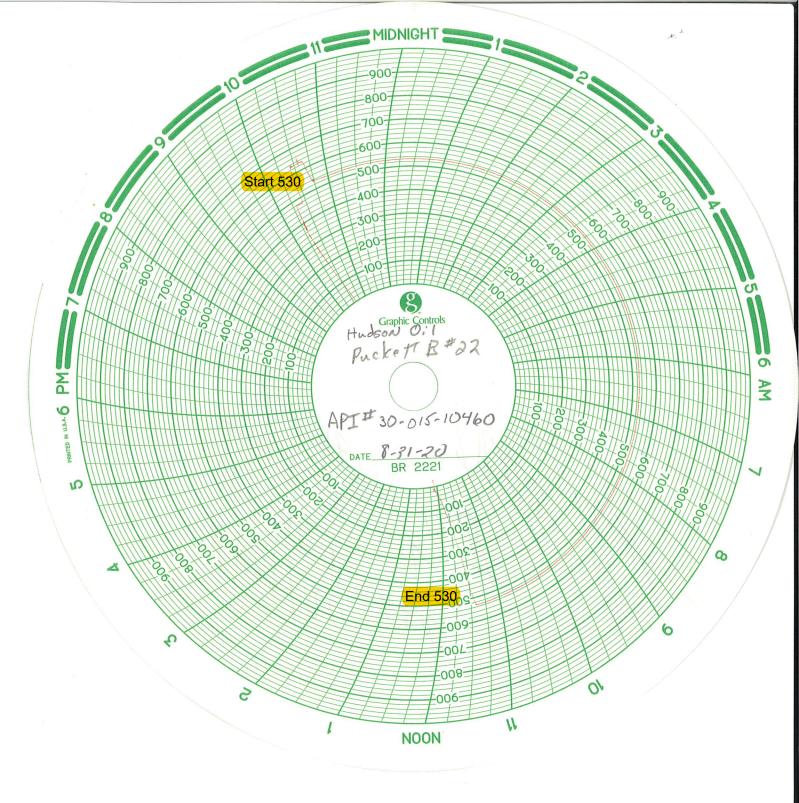
Submit I Copy To Appropriate District Office		IMOCD Rec'd: 9/23/2020 Form C-103
<u>District I</u> – (575) 393-6161 Energ	gy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		30-015-10460
811 S. First St., Artesia, NM 88210 OIL	CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		NMLC029415B
SUNDRY NOTICES AND		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRI DIFFERENT RESERVOIR. USE "APPLICATION FOR		B 1 W B
PROPOSALS.)	FERMIT (FORM C-101) FOR SUCH	Puckett B
1. Type of Well: Oil Well X Gas Well	Other	8. Well Number 22
2. Name of Operator Hudson Oil Company of Texas		9. OGRID Number 025111
3. Address of Operator		10. Pool name or Wildcat
616 Texas Street, Fort Worth, Texas	76102	Maljamar Grayburg-San Andres
4. Well Location		
Unit Letter P: 1295	feet from the South line and	25 feet from the East line
Section 24	Township 17S Range 31E	NMPM Eddy County
	tion (Show whether DR, RKB, RT, GR,	· · · · · · · · · · · · · · · · · · ·
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
	D ABANDON ☐ REMEDIAL W	
TEMPORARILY ABANDON		DRILLING OPNS. P AND A
	E COMPL CASING/CEM	<u>—</u>
DOWNHOLE COMMINGLE	_	
CLOSED-LOOP SYSTEM .	_	
OTHER: Mechanical Integrity Test	OTHER:	
		, 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.		
proposed completion of recompletion.		
Please find attached a pressure chart for the annual Mechanical Integrity Test for the referenced well.		
	Assented for record test not wit	tnasad
Accepted for record test not witnessed NMOCD DS 10-20-2020		
1111100D D3 10-20-2020		
Spud Date:	Rig Release Date:	

I hereby certify that the information above is tru	e and complete to the best of my knowl	edge and belief.
.		
CICNATURE STORY	TITLE Duncident	DATE.
SIGNATURE	TITLE President	DATE
Type or print name E. Randall Hudson III	E-mail address: frankg@h	udsonoil.com PHONE: 575-365-8165
For State Use Only		lindo, Field Superintendent
· · · · · · · · · · · · · · · · · · ·		•
APPROVED BY:Conditions of Approval (if any):	TITLE	DATE



S/31/20 DUBLE A THAIS HUDSON O'S THE DUCKET DEM

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