CERVAIL		
" CONSERICT		
Submit One Copy To Apple Parish DISTRICT  Submit One Copy To Apple Parish DISTRICT  Office  District I  1625 N. French Dr., Hobbs, NM 88240	ate of New Mexico	Form C-103
Office Dietrict I	nerals and Natural Resources	Revised November 3, 2011
1625 N. French Dr., Hobbs, NM 88240 District II	SERVATION DIVISION	WELL API NO. 30-015-29715
811 S. First St., Artesia, NM 88210	SERVATION DIVISION	5. Indicate Type of Lease
<u> </u>	South St. Francis Dr.	STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Sa	nta Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		E-052290009
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		Poker Lake Unit
PROPOSALS.) 1. Type of Well:   ☐ Oil Well ☐ Gas Well ☐ Other		8. Well Number 137
2. Name of Operator		9. OGRID Number
BOPCO, LP		260737
3. Address of Operator		10. Pool name or Wildcat
6401 Holiday Hill Rd. Bldg 5 Midland, TX 79707		Nash Draw, Brushy Canyon
4. Well Location		
Unit Letter D: 330 feet from the North line and 330 feet from the West line		
Section 32 Township 23S Range		
11. Elevation (S	how whether DR, RKB, RT, GR, etc	·)
12. Check Appropriate Box to Indicate Natur	e of Notice Report or Other I	Data
12. Check Appropriate Box to indicate Nature of Notice, Report of Other Bata		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON		
PULL OR ALTER CASING  MULTIPLE COM	MPL   CASING/CEMEN	NT JOB
OTHER:	□ N Leastion is	ready for OCD increation after P&A
OTHER:		
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 I BACK NAME WHAT SWIMPER AND MEMBARER OF PERSON OF		
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR		
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.		
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.) Buried Power Line Not Removed  All other environmental concerns have been addressed as per OCD rules.		
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.	ricase, an electrical service poles a	nd files have been removed from lease and wen
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When all work has been completed, return this form to the appropriate District office to schedule an inspection.		
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SIGNATURE MANY (UM)	TITLE Regulatory Coording	pator DATE // DU//P
THE OR PRINTENANT FRANCIS I Charme	n Maria tracia charrica	doeneray.com 01103/0 422 221 7270
TYPE OR PRINT NAME *fracie J. Cherry For State Use Only	E-MAIL: tracie_cherry@:	ktoenergy.com PHONE: 432-221-7379
APPROVED BY:	TITLE DENIE!	DATE 12-11-18