4	Submit 1 Copy To Appropriate District	State of New Mexico				Form C-103	
	Office District I – (575) 393-6161	Energy, Minerals and Natural Resource			Revised July 18, 2013		
	1625 N. French Dr., Hobbs, NM 88240	<b>3.</b> .			WELL API NO.		
	<u>District II</u> - (575) 748-1283 811 S. First St., Artesia, NM 88210	1220 South St. Francis Dr. Santa Fe, NM 87505			30-015-20627		
	<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410				5. Indicate Type of STATE		
	<u>District IV</u> – (505) 476-3460				6. State Oil & Gas I	FEE 🔀	
,	1220 S. St. Francis Dr., Santa Fe, NM 87505			LC-029418-B			
	SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name or U	nit 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					_	
	PROPOSALS.)				Lea C Federal		
-	. Type of Well: Oil Well Gas Well Other Injection  2. Name of Operator						
	Vintage Drilling LLC				9. OGRID Number	024164	
	3. Address of Operator				10. Pool name or W		
		P.O. Box 248, Artesia, NM 88211-0248				Grayburg Jackson; SR-Q-G-SA	
	4. Well Location						
	Unit LetterF:_	1980feet fron	n theNor	th line and	_1980feet from the	e West line	
	Section 11	Town		Range 31E	NMPM	County Eddy	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)						And the second	
3955 DF							
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						.4	
		TICE OF INTENTION TO: SU				ORT OF:	
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERIN COMMENCE DRILLING OPNS.   P AND A					EMEDIAL WORK ☐ ALTERING CASING ☐		
					AND A		
	PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   DOWNHOLE COMMINGLE						
	CLOSED-LOOP SYSTEM						
_	OTHER:			OTHER:		×	
	13. Describe proposed or comp	13. Describe proposed or completed operations. (Clearly state all pertinent details and give pertinent dates including estimated dates.)					
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagraphoposed completion or recompletion.						bore diagram of	
			*				
,							
3	year required M.I.T - successful te	st performed 6-5-19	€				
						CEMED	
					11711	1 4 2019	
JUN I						I = 2013	
					DISTRICTIL	ARTESIAO.C.D.	
S	pud Date:		Rig Release I	Pate:			
			J				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.							
	10 \ \ \ \ \ \						
S	IGNATURE	duha	-TITI F	Sacratan	DATE	6/10/10	
	11 Corost		. * 1 * LUL	scoretary	DATE	6/13/19	
	ype or print nameMarie Durham		E-mail addres	s: vintage@plateau	tel.net PHON	E: 575-365-8886	
F	or State Use Only			0.			
Δ	PPROVED BY: Da A		TITLE 🗢	- 1	10	, .	
	onditions of Approval (if any):		HILE (O)	npliance c	Wice DATE	6-17-19	