

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

WELL API NO.
 30-015-20246

5. Indicate Type of Lease
 STATE FEE Private

6. State Oil & Gas Lease No.

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.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
 POGO OIL & GAS OPERATING, INC.

3. Address of Operator
 P.O. BOX 2769 HOBBS, NM 88240

4. Well Location
 Unit Letter J : 1980 feet from the SOUTH line and 1980 feet from the EAST line
 Section 01 Township 23S Range 26E NMPM EDDY County

7. Lease Name or Unit Agreement Name
 COLLATT ESTATE COM

8. Well Number 001

9. OGRID Number
 372000

10. Pool name or Wildcat
 CARLSBAD; ATOKA, SOUTH (GAS)

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3224'

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

NOTICE OF INTENTION TO: 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"/>		SUBSEQUENT REPORT OF: 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"/> <input checked="" type="checkbox"/> Location is ready for OCD inspection after P&A	
--	--	--	--

All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.
 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, 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. *Buried Cable Not Removed*
 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. *Meter house/Run Not Removed*
 All metal bolts and other material have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have to be removed.) *Risers Not Removed*
 All other environmental concerns have been addressed as per OCD rules. *T-Posts*
 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. *Junk on location + In Pasture Not Removed*
 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.

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 [Signature] TITLE Production Manager DATE 8-28-2019

Type or print name M. Y. Merchant E-mail address: Mymerch@penrocoil.com PHONE: 575-492-1236

For State Use Only

APPROVED BY: DENIED TITLE DENIED DATE 9/5/19

Conditions of Approval (if any):