Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240		WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-045-28653
District III - (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE ☐ FEE ☒
1000 Rio Brazos Rd., Aztec, NM 87410 <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	,	o. State on & Gas Bease 140.
	CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO	SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	
DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	CATION FOR PERMIT" (FORM C-101) FOR SUCH	Sunco Disposal
·	Gas Well Other SWD Class I	8. Well Number
		1 OCRIDAL - L-
2. Name of Operator Agua Moss, LLC		9. OGRID Number 247130
3. Address of Operator		10. Pool name or Wildcat
PO Box 600 Farmington, NM 8749	99	SWD MV
4. Well Location		
Unit Letter_E:	1595feet from theNorth line and1	1005feet from theWestline
Section 2	Township 29N Range 12W	NMPM County San Juan
	11. Elevation (Show whether DR, RKB, RT, GR, etc.	2.)
12 61 1	5859' GL	
12. Check A	Appropriate Box to Indicate Nature of Notice	, Report or Other Data
NOTICE OF IN	ITENTION TO: SUE	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK 🛛	PLUG AND ABANDON REMEDIAL WOR	
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DF	RILLING OPNS. □ P AND A □
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	NT JOB 🔲
DOWNHOLE COMMINGLE		
CLOSED-LOOP SYSTEM	CTUED:	F-1
OTHER: 13 Describe proposed or comp	OTHER:	nd give pertinent dates including estimated date
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.		
♦ ,		
MIDI I Inslate and five assessmination	n between the and annulus. Verbal annual to annual	d marsing d has Observed a Demois 2/21/2014
MIRO Isolate and fix communicatio	n between the and annulus. Verbal approval to procee	ed received by Charlie Perrin 2/21/2014
;		RCVD FEB 26 '14
		OIL CONS. DIV.
		DIST. 3
Spud Date:	Rig Release Date:	
<u> </u>		
I hereby certify that the information	above is true and complete to the best of my knowled	ge and belief.
	< 1/. Mul	
SIGNATURE / MILLIM	TITLE Regulatory Compliance	e Specalist DATE 2/24/14
ordinations of word	TITLE Regulatory Compliance	DAID_2/24/14
Type or print namePhilana Thor	mpson E/mail address:pthompson@mer	rrion.bz PHONE: _505-486-1171
For State Use Only		
ADDROVED DI Sha hi	TITLE SUPERVISOR DISTRIC	CT#9 DATEED 2 9 2014
APPROVED BY: () () () () () () () () () (DATEFEB 2 8 2014
Conditions of Approval (II any):	₽	

PV