

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

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.)		WELL API NO. 30-039-24165
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator DJR Operating, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 1 Road 3263, Aztec, NM 87410		7. Lease Name or Unit Agreement Name Shiela Hixon
4. Well Location Unit Letter <u>D</u> <u>660</u> feet from the <u>S</u> line and <u>1050</u> feet from the <u>W</u> line Section 26 Township 25N Range 03W NMPM County Rio Arriba		8. Well Number 001
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 7180		9. OGRID Number 371838
		10. Pool name or Wildcat W. Lindrith Gallup DK Ext.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: RTP ☒

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.

DJR Operating returned this well to production on 05/15/2019

NMOC

DISTRICT III

Spud Date: 04/13/1988

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Shaw Crues TITLE HSE Technician DATE 5/17/19
Type or print name Shaw Crues E-mail address scrues@djrlc.com PHONE 505-347-6
For State Use Only

APPROVED BY Accepted for record TITLE Ar DATE _____
Conditions of Approval (if any):