HOBBSOCD	
1 2 2013	
Submit One Copy To Appropriate District AR 12 2013 Submit One Copy To Appropriate District AR 12 2013 State of New Mexico Energy, Minerals and Natural Resources	Form C-103
Office <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 State of New Mexico Energy, Minerals and Natural Resources RECEIVED	March 18, 2009 WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-025-25588
District III 1000 Rio Brazos Rd., Aztec, NM 87410 1000 Rio Brazos Rd., Aztec, NM 87410	5. Indicate Type of Lease STATE FEE
District IV Santa Fe, INM 87505	6. State Oil & Gas Lease No.
1220 S. 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	7. Lease Name or Unit Agreement Name B T LANEHART
PROPOSALS.) 1. Type of Well: Oil WellGas Well Other	8. Well Number 006
2. Name of Operator BETTIS, BOYLE & STOVALL	9. OGRID Number 002175
3. Address of Operator	10. Pool name or Wildcat
P.O. BOX 1240, GRAHAM, TX 76450	LANGLIE MATTIX -7. RVRS- QN-GRBG
4. Well Location Unit Letter_ B _:_ 990feet from the <u>NORTH</u> line and <u>1650</u> feet from the <u>EAST</u> line	
Section 21 Township 25SRange 37ENMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3080 GR	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
' PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING ' TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A I	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
OTHER:	
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	
<u>UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR</u> 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.)	
 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.	
When all work has been completed, return this form to the appropriate District office to schedule an inspection.	
SIGNATURE TITLE REGULATORY	ANALYST DATE 03/07/13
TYPE OR PRINT NAME KYLE BEREND E-MAIL: Kberendle i	<u> 2650, 1. Com</u> PHONE: <u>940-549-0</u> 780
MARCHENELLE Imedian Alling Alling	
APPROVED BY: TV and W Token TITLE WM JUME	DATE DATE DATE

Conditions of Approval (if any):

JUN 06 2013