Submit C Office	e Copy To Appropriate District State of New Mexico				Form C-103		
	rench Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources M 88240			Revised November 3, 2011 WELL API NO.		
District I 811 S. Fi	st St., Artesia, NM 88210	OIL CONSERVATION DIVISION			30-015-23851 5. Indicate Type of Lease		
District I	1 Brazos Rd., Aztec, NM 87410	s Rd. Azec. NM 87410 1220 South St. Francis Dr.			STATE FEE		
District I		Santa Fe, NM 87505			6. State Oil & Gas Lease No. 3536		
8/303	SUNDRY NOTICES AND REPORTS ON WELLS				7. Lease Name of	or Unit Agreement Name	
DIFFER	10 NO ⁺ USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A IFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH ROPOSALS.)					Dinero State Com	
	1. Type of Well: Oil Well Gas Well Other					8. Well Number 1	
2. Nan	Name of Operator NERO OPERATING COMPANY					9. OGRID Number 006224	
3. Add	Address of Operator				10. Pool name or Wildcat		
P.O. Be	P.O. Box 10505, MIDLAND, TX 79702					Delaware Indian Draw East	
4. Well Location Unit Letter_C : <u>660</u> feet from the <u>N</u> line and <u>660</u> feet from the <u>W</u> line Section <u>16</u> Township <u>22S</u> Range <u>28E</u> NMPM County <u>Eddy</u> 11. Elevation (Show whether DR, RKB, RT, GR, etc.)							
	3102.2'						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data							
NOTICE OF INTENTION TO: SUBSEQUENT REP						EPORT OF:	
	RFØRM REMEDIAL WORK 🔲 🛛 PLUG AND ABANDON 🔲 👘 REMEDIAL WOI				K D	ALTERING CASING	
				COMMENCE DRI		PANDA 🛛	
PULL	DR ALTER CASING	MULTIPLE COMPL		CASING/CEMENT	rjob 🗌		
OTHER		····		Location is re			
All All	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.						
	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.							
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.)							
🛛 Pip	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. 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.							
When all work has been completed, return this form to the appropriate District office to schedule an inspection.							
SIGNA	TURE Charlie Uil				•		
Ton Cand	R PRINT NAME Charl	ie Williams	E-MAIL:			PHONE: <u>432-684-554</u> 4	
APPRO	VED BY:	Rel	_TITLE{	omplutie E	OFFICER	phone: <u>432-684-5544</u> date_ <u>8/16/2017</u>	
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