

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
RECEIVED
Minerals and Natural Resources
OIL CONSERVATION DIVISION
JAN 28 2019
1220 South St. Francis Dr.
Santa Fe, NM 87505
DISTRICT II-ARTESIA O.C.D.

Form C-103
Revised July 18, 2013

WELL API NO. 30-015-32438	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Shugart State Com SWD	
8. Well Number 2	
9. OGRID Number 246368	
10. Pool name or Wildcat	
4. Well Location Unit Letter <u>K</u> : 1850 feet from the <u>S</u> line and 1650 feet from the <u>W</u> line Section <u>16</u> Township <u>18</u> South Range <u>31</u> East NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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: ☐

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.

Rig up over hole set BOP 1-25-18
Kill well pressure and release packer. Pull
tubing and packer. Clean out well bore to
T.D. Run in hole with new or reconditioned
packer and new tubing. Conduct MIT and
Release Rig.

Spud Date:

Rig Release Date:

RF

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

SIGNATURE

TITLE

Manager

DATE

1-23-18

Type or print name Gary Pritchett

gary.pritchett@basicenergyservices.com

E-mail address:

PHONE: (432) 213-6641

For State Use Only

APPROVED BY:

TITLE

Compliance Officer

DATE

1-30-19

Conditions of Approval (if any):