submit 1 Copy To Appropriate District RECEVED State of New Mexico			Form C-103	
histrict 1 - (575) 393-6161 Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.		
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> - (575) 748-1283				
BIS First St., Artesia, NM 88210 MAY 2 7020 CONSERVATION DIVISION			30-015-20246 5. Indicate Type of Lease	
District III = (505) 334-6178		cis Dr.		EE Private 🛛
1000 Rio Brazos Rd., Aztec. NM 87410 District IV - (505) 476-3460 DISTRICT II-ARTESIAO Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM R7505 R7505				
District IV - (505) 476-3460 DISTRICT II-ARTESIA USAnta Fe, NM 87505 6. State Oil & Gas Lease No.				
07303				
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPHAAR BLUG PACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name COLLATT ESTATE COM	
1. Type of Well: Oil Well Gas Well Other RECEIVED			8. Well Number 00	01
2. Name of Operator			9. OGRID Number	
POGO OIL & GAS OPERATING, INC.			372000	
3. Address of Operator			10. Pool name or Wildcat	
P.O. BOX 2769 HOBBS, NM 88240			CARLSBAD; ATOKA, SOUTH (GAS)	
4. Well Location				
Unit Letter J : 1980 feet from the SOUTH line and 1980 feet from the				
EASTline				
Section 01 Township 23S Range 26E NMPM EDDY County				
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
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NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
				ALTERING CASING
EMPORARILY ABANDON				P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB				
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM				
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 UNIT LETTER.				
SECTION, TOWNSHIP, AND RANGE, ALL INFORATION 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. The last th				
other production equipment. The start was possible to right ground control and has been cleared of all joins, trash, now lines and other production equipment. The start was possible to right and risers have been cut off at least two feet below ground level? Might be an appropriate the start was provided and the start was feet below ground level?				
this is a one-weit lease of ast remaining weit on lease, the pattery 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 material 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.		**		
If this is a one-well lease or last remaining well on it location, except for utility's distribution infrastructure.	ease: all electrica	service poles and li	ines have been remo	ved from lease and well
location, except for utility's distribution infrastructure.				
Spud Date:	Rig Release Da	ite:		
	_			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE LANGE LANGE	TITLE Pr	oduction Manager	DATE	5 22 2010
VICTORIA STATE OF THE STATE OF	III LE KI	odaction manager	DATE_	5-22-2019
Type or print name M. Y. Merchant	E-mail address	: Mymerch@nei	nrocoil.com PHO	NE: 575-492-1236
For State Use Only			•	
			G =	
APPROVED BY:	TITLE	DENIED	DA	TE 5/29/19
Conditions of Approval (if any):	p +2.			