Submit I Copy To Appropriate District Office	State of New Mexico	Form C-103	
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	1 0010	WELL API NO. 30-015-20215	
811 S. First St., Artesia, NM 88210 FEB 1 District III – (505) 334-6178	2009L CONSERVATION DIVISION	5. Indicate Type of Lease	
1000 Die Denne Dd. Astes NN 97410	1220 South St. Francis Dr.	STATE 🔀 FEE 🗌	
<u>District IV</u> – (505) 476-346 <b>DISTRICT II-AH</b> 1220 S. St. Francis Dr., Santa Fc, NM	TESIA O.C.DSanta Fe, NM 87505	6. State Oil & Gas Lease No.	
87505		19053	
	ES AND REPORTS ON WELLS LS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICAT PROPOSALS.)	FION FOR PERMIT" (FORM C-101) FOR SUCH	Kester rates State	
1. Type of Well: Oil Well Ga	as Well A Other Welly year un We	8. Well Number	
2 Name of Operator ENES 64	DBA SACIL Brewer	■ 19. OGRID Number	
3 Address of Operator	1	10. Pool name or Wildcat	
4. Well Location	1901 DW 883PC	1/2 kesia Queen Graybuil	
	310 feet from the North line and	990 feet from the EAST line	
Section 32	Township (85 Range 286	NMPM County Eddy	
	11. Elevation (Show whether DR, RKB, RT, GR,		
The sign of the si	100		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTE		UBSEQUENT REPORT OF:	
	PLUG AND ABANDON  REMEDIAL W		
		DRILLING OPNS.□ P AND A □	
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEM	ENT JOB	
CLOSED-LOOP SYSTEM	100	al, MLT.	
OTHER:		echanical luxqrity test [	
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 on recommendation $Q = A + Q$			
Sight befored sign in the sign			
Tolegrity lest between tubulo scassino			
Pressure between fubino l'asino 300 pounds for 30 nimbres - No leaks - Good latequity			
24 minutes - No books - Good latearita			
20 IMPAGE 2	100 KG 42 COSC	(6)	
		1	
Tested 1/31	12019		
123160 1/3/	, -		
Spud Date:	Rig Release Date:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE Jackie De Newer TITLE Clones operator DATE LEB 8: 2019  Type or print name JACICIE Brewer E-mail address: Drewer 2120 ad comphone: 575-840-7560			
The control of the Board of the base of 120 - 100M Credit NOIN			
For State Use Only  E-mail address: O'RUE ALO COLO PHONE: 5 15 840 1560			
APPROVED BY: Day & my	TITLE COMA/A	ON/15 er DATE 2 - 19-19	
Conditions of Approval (if any):	III - pronce	OFFICE DAIL & I I	

## State of New Mexico Energy, Minerals and Natural Resources Department

Susana Martinez Governor

Ken McQueen Cabinet Secretary

Matthlas Sayer Deputy Cabinet Secretary Heather Riley, Division Director Oil Conservation Division



Date: <u>[-31-19</u> API# <u>30-015-20215</u>
A Mechanical Integrity Test (M.I.T.) was performed on, Well Rosler Ycoles State # 380
M.I.T. is successful, the original chart has been retained by the Operator on site. Send a legible scan of the chart with an attached Original C-103 Form indicating reason for the test, via post mail to District NMOCD field office. A scanned image will appear online via NMOCD website, <a href="https://www.emnrd.state.nm.us/ocd/OCDOnllne.htm">www.emnrd.state.nm.us/ocd/OCDOnllne.htm</a> 7 to 10 days after postdating.
M.I.T. is unsuccessful, the original chart is returned to the Operator. Repairs will be made, Operator is to schedule for a re-test within a 90-day period. If this is a test of a repaired well currently in non-compliance, all dates and requirements of the original are still in effect.  No expectation of extension should be construed because of this test.
M.I.T. for Temporary Abandonment, shall include a detailed description on Form C-103, including the location of the CIBP and any other tubular goods in the well including the Operator's request for TA status timeline.
M.I.T. is successful, after the secondary request of a scheduled M.I.T. is performed. Therefore, Operator has within a 30-day period from the M.I.T. to submit a current C-103 along with a legible scan of the Chart, including a detailed description of the repair(s). Only after receipt of the C-103 will the non-compliance be closed.
M.I.T. <b>is successful</b> , Initial of an injection well, you must submit a <b>form C-103</b> to NMOCD within 30 days. A <b>C-103 form</b> must include a detailed description of the work performed on this well Including the position of the packer, tubing Information, the date of first Injection, the tubing pressure and Injection volume.

Please contact **Rusty Klein** at **575-748-1283 x109** for verification to ensure documentation requirements are in place prior to injection process.

If I can be of additional assistance, please feel free to contact me at (575) 748-1283 ext. 103.

Dan Smolik, Compliance Officer

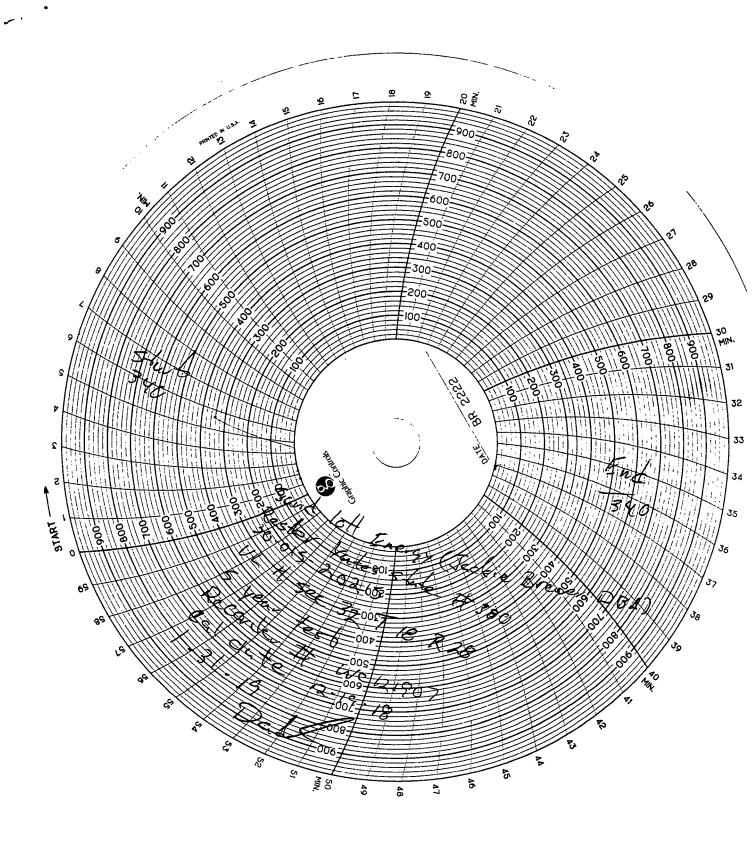
EMNRD-O.C.D.

District II - Artesia, NM

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DISTRICT II-ARTESIA O.C.D.



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DISTRICT II-ARTESIA O.C.D.