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" " 3 50/2						
Submit One Copy To Appropriate	A Oistrict	State of New 1	Mexico		Form (	C-103
Office District I	mit One Copy To Appropriate Centrict  State of New Mexico  Energy, Minerals and Natural Resources  S N. Fried M. Statesia NM 88240  OIL CONSERVATION DIVISION			Revised November 3, 2011		
1625 N. Frank Dr., Hobbs, NM	bs, NM 88240			WELL API NO.		
811 S. First St., Artesia, NM 882	10 OIL	CONSERVATION	ON DIVISION	30-015-30636  5. Indicate Type of Lease		
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM	87410	1220 South St. F	rancis Dr.	STATE		
District IV		Santa Fe, NM 87505			as Lease No.	
1220 S. St. Francis Dr., Santa Fe, 87505	NM					
SUNDR (DO NOT USE THIS FORM FO DIFFERENT RESERVOIR. US	7. Lease Name or Unit Agreement Name JACQUE AQJ STATE					
PROPOSALS.)  1. Type of Well: Oil Well Gas Well Other				8. Well Number #2		
2. Name of Operator				9. OGRID Number		
EÔG RESOU	RCES, INC			7377		
3. Address of Operator PO BOX 2267 MIDLAND, TEXAS 79702				10. Pool name or Wildcat LOST TANK; DELAWARE, WEST		
·	WIIDLAND, IEA	45 /9/02		LOSI TANK; D.	ELAWAKE, WEST	
4. Well Location	1650 foot from th	COUTH England 2	20 fact from the WEG	IT II		
	•		30 feet from the WES	<u>I</u> line		
Section 34 Tow		tion (Show whather I	County LEA OR, RKB, RT, GR, etc.)	60-36	A STATE OF THE STA	er og er
	1 A 196 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		71, 10xD, 111, O11, e1c.)			
12. Check Appropriate	<del></del>	Nature of Notice,	Report or Other Da	ata		
		•	•		DODE OF	
				SEQUENT RE		<u>.</u> П
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORTEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DR				RK		
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMEN				_	I AND A	_
	<del></del>					
OTHER:			│ │ │ │ Location is re	ady for OCD insp	ection after P&A	
All pits have been reme Rat hole and cellar have	diated in complianc	e with OCD rules and	the terms of the Operation halos boys been	ator's pit permit an	id closure plan.	
Rat hole and cellar have A steel marker at least 4						
$\mathcal{T}$ .		3	···			
OPERATOR NAM	IE, LEASE NAME	, WELL NUMBER	, API NUMBER, QU	ARTER/QUART	ER LOCATION O	<u>R</u>
UNIT LETTER, S PERMANENTI V	ECTION, TOWNS	SHIP, AND RANGE HE MARKER'S SU	. All INFORMATIO	N HAS BEEN W	ELDED OR	
<u> </u>	STAMPED ON T	HE MARKER'S SU	RFACE.	•		
The location has been le	eveled as nearly as p	ossible to original gr	ound contour and has b	een cleared of all	junk, trash, flow line	es and
other production equipment.  Anchors, dead men, tie	Burged Pr	ower Cable	Not Remove	ed	· •	
Anchors, dead men, tie	downs and risers ha	ve been cut off at lea	st two feet below grour	nd level.	. 1	**1
If this is a one-well leas OCD rules and the terms of the						
from lease and well location.		min and elocate plan	1111 110 W 111100, produ	otton equipment u	na jame nave eeen re	/1110 V CC
All metal bolts and other	materials have been	removed. Portable	bases have been remov	ed. (Poured onsite	concrete bases do n	ot have
to be removed.)	l h h		D1			
All other environmental Pipelines and flow lines				All fluids have be	en removed from no	m
retrieved flow lines and pipe		od in docordance with	1 17.13.33.10 NWAC.	An nuids have be	on removed from no	11-
If this is a one-well leas		vell on lease: all elec	trical service poles and	lines have been re	moved from lease ar	nd well
location, except for utility's						
When all work has been com	pleted, return this fo	orm to the appropriate	e District office to sche	dule an inspection	•	•
.V	Marilant					
SIGNATURE Yay	Madaox	TITLE:	REGULATORY SPE	CIALIST DATE	5/30/2019	
TYPE OR PRINT NAME:	KAY MADDOX					
For State Use Only	IVA I MIVIDION	L-IVIAIL. Kay_III	iduox(weogiesources.co	om .rhune: _4.	<i>32</i> -080-3038	:
	DENIED		ddox@eogresources.c	<b>J</b> 6		_
APPROVED BY:		TITLE_			_date_ <i><b>6/5/1°</b></i>	<u>7</u>
Conditions of Approval (if an	ıy):				•	