Submit One Copy To Appropriate District	State of New Mexico	Form C-103	
Office District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	Revised November 3, 2011 WELL API NO. 30-005-21083	
<u>District II</u> 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE TEE	
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505		17847	
	AND REPORTS ON WELLS O DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		CAUDILL	
PROPOSALS.) 1. Type of Well: X Oil Well Gas Well Other		8. Well Number 002	
2. Name of Operator RELIANCE ENERGY, INC.		9. OGRID Number 149441	
3. Address of Operator	51, INC.	10. Pool name or Wildcat	
300 N. MARIENFELD, STE 1100, MIDLAND TX 79701		Caprock, Queen	
4. Well Location			
Unit Letter D: 330 feet from the N line and 750 feet from the W line			
Section 34 Township 13S Range 31F NMPM County Chaves			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4267' GR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTEN	TION TO: SI	UBSEQUENT REPORT OF:	
	IG AND ABANDON ☐ REMEDIAL W		
Service Acceptable and the service of the service o	AMEN AND AND AND AND AND AND AND AND AND AN	DRILLING OPNS. P AND A	
PULL OR ALTER CASING MUL	TIPLE COMPL CASING/CEM	IENT JOB	
OTHER:		is ready for OCD inspection after P&A	
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 A CASE NAME WELL NUMBER ARE NUMBER OUT REPOSITABLED LOCATION OF			
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.)	e been removed. Portable bases have been re	emoved. (Poured onsite concrete bases do not have	
All other environmental concerns hav	e been addressed as per OCD rules.		
Pipelines and flow lines have been absertieved flow lines and pipelines.	andoned in accordance with 19.15.35.10 NM	IAC. All fluids have been removed from non-	
	ning well on lease: all electrical service pole	s and lines have been removed from lease and well	
location, except for utility's distribution in			
	hone conversation, all flow lines, buried o		
1	this form to the appropriate District office to		
SIGNATURE Setsy Luna	TITLERegu	llatory ManagerDATE11/19/20	
TYPE OR PRINT NAME Betsy Luna	E-MAIL: bluna@reim	id.com PHONE: 432-683-4816	
APPROVED BY: XXXX 3	TITLE Compliance (Officer A DATE 12/4/20	

Conditions of Approval (if any):	