Submit One Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I 1625 N. French Dr., Hobbs, NM 88240			Revised November 3, 2011 WELL API NO.	
District II 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025-33544	1
District III	istrict III 1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE	1
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505		6. State Oil & Gas Lease No.	-	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C- 10) FOR SUCH PROPOSALS.) 1. Type of Well: OII Well Gas Well Other			7. Lease Name or Unit Agreement Na MATTERN	me
PROPOSALS.) I. Type of Well: Oil Well Gas Well Other		8. Well Number 4	1	
2. Name of Operator			9. OGRID Number 16696	1
3. Address of Operator	ddress of Operator		10. Pool name or Wildcat	
PO BOX 4294; HOUSTON, TX 772	IO RE	CEIVED	EUMONT YATES -7 RVRS-QUEEN	ö
4. Well Location PENKOSE SKELLY GO				
Unit Letter K : 2310 feet from the SOUTH line and 2310 feet from the WEST line				
	IS Range <u>37E</u> NMPM	County LEA		
	 Elevation (Show whether DR, 3491' 			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK DUIG AND ABANDON DIE REMEDIAL WORK DIA LTERING CASIN				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI]
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	ЈОВ 🗌	VIS
OTHER:		Location is re	ady for OCD inspection after P&A	N
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 				
	at and at least 4 above ground i	level has been set hi	concrete. It shows the	
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR				
	ED ON THE MARKER'S SUR			
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.)				
 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 re location, except for utility's distribution		cal service poles and	l lines have been removed from lease ar	id well
When all work has been completed, ret	urn this form to the appropriate I	District office to sche	edule an inspection.	
SIGNATURE Vale Rit	TITLE_I	ENVIRONMENTAL	SPECIALIST_DATE	2
TYPE OR PRINT NAME _WADE DI For State Use Only	\mathbf{O}	dittrich@oxy.com	PHONE: _575-390-2828	_
APPROVED BY: Marhht	nitalen_ TITLE F	,ES.	DATE 02/19	2018
Conditions of Approval (if any):				

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