Continue	Submit One Copy To Appropriate District	State of New Me	exico	Form C-103		
MOSERVATION   Mestal District   Moserate	Office			Revised November 3, 2011		
1220 South St. #GRPGP Policy	1625 N. French Dr., Hobbs, NM 88240					
1220 South St. #GRPGP Policy		OIL CONSERVATION	DIVISION			
RECEIVED   Same Fe, NM   Same Fe, NM   RECEIVED   The location bar been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.   A steel marker at least 4" in diameter and at least 4" above ground level has been seen in concrete. It shows the OPERATOR NAME, LEASE NAME, WELL NUMBER, AURATER OCATION OR UNIT LETTER RESCRION, TO WHIST HANDED 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 object on the terms of the terms of the downs and risers have been removed. (Poured onsite concrete bases do not have to be removed.)   Poured has been removed from non-retrieved flow lines have been removed from lease and well location.   Pour Pour Pour Pour Pour Pour Pour Pour	District III	1220 South St. Brat	icos Dr			
RECEIVED   Township   South Hobbs (G/SA) Unit   Repeated   South Hobbs (G/SA) Unit   Representation   South Hobbs (G/SA)   Representation   South Hobbs (G/SA)   Representation   South Hobbs (G/SA) Unit   South	the state of the s	Santa Fe, NM 8	7505 ZU <b>19</b>			
SUNDRY NOTICES AND REPORTS ON WELLS   7. Lease Name or Unit Agreement Name   1. Depth of Well:	1220 S. St. Francis Dr., Santa Fe, NM			o. State on a das Bease No.		
DO NOT USE THIS FORM FOR PROPOSALES TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT ESERVOIR. USE "APPLICATION FOR PRENNT" (FORM C-101) FOR SUCH PROPOSALS)   1. Type of Well:   Doli Well   Gas Well   Other   9. OGRID Number   157984     2. Name of Operator   9. OGRID Number   157984     3. Address of Operator   10. Pool name or Wildcat   167984     4. Well Location   Unit Letter   157984   10. Pool name or Wildcat   167984     5. Address of Operator   10. Pool name or Wildcat   167984     6. Well Location   Unit Letter   1580   feet from the   South line and   1980   feet from the   West line   Section   5   Township   19-S Range   38-E   NMPM   Lea   County     11. Elevation (Show whether DR, RKB, RT, GR, etc.)   12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:   PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OPPS   PAND A   2     12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:   PERFORM REMEDIAL WORK   ALTERING CASING   COMMENCE DRILLING OPPS   PAND A   2     14. Dits 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, OUARTER (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.   And convert the production equipment.   And convert the state of the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and the terms of the Op				7. Lease Name or Unit Agreement Name		
Roperson   Section   Sec	(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA	LS TO DRILL OR TO DEEPEN OR PL	UG BACK TO A			
2. Name of Operator		Sas Well Other				
Cocidental Permian Ltd.   157984   3. Address of Operator   10. Pool name or Wildcat   P.O. BOX 4294, Houston, TX 77210   10. Pool name or Wildcat   Hobbs G/SA   4. Well Location   Unit Letter   K   1980   feet from the   South   line and   1980   feet from the   West   line   Section   5   Township   19-S   Range   38-E   NMPM   Lea   County     11. Elevation (Show whether DR, RKB, RT, GR, etc.)   36329/86   12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:   PERFORM REMEDIAL WORK   PLUG AND ABANDOON   CHANGE PLANS   CASING/GEMENT JOB   ALTERING CASING   PAND A   ZOMENCE ORILLING OPNS   PAND A   Z		Jas Well   Other		9. OGRID Number		
P.O. BOX 4294, Houston, TX 77210   Hobbs G/SA						
4. Well Location  Unit Letter						
Unit Letter K : 1980 feet from the South line and 1980 feet from the West line Section 5 Township 19-S Range 38-E NMPM Lea County 3629/KB  11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3629/KB  12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   SUBSEQUENT REPORT OF:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   CASING/CEMENT JOB   PAND A   ZEMENTAL STATE OF STATE USE ON THE REMEDIAL WORK   ALTERING CASING   COMMENCE DRILLING OPNS   PAND A   ZEMENTAL STATE OF STATE USE ONLY.		X 77210		Hobbs G/SA		
11. Elevation (Show whether DR. RKB, RT, GR, etc.)   3622 KB   12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:   PERFORM REMEDIAL WORK   PLUG AND ABANDON   COMMENCE OF RILLING OND   ALTERING CASING   COMMENCE DRILLING OND   PAND A   DEPARTMENT OF:   COMENCE DRILLING OND   PAND A   DEPARTMENT OF:   C	1	0 11 4		, .		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3629'KB  NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   PAND A   DATE   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   PAND A   DATE   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, OUARTER/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 addressed as per OCD rules.  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 lease: all electrical service poles and lines have been removed from non- retrieved flow lines and pipelines.  First to the contract of the operator's pit permit on the appropriate District office to schedule an inspection.  SIGNATURE  TYPE OR PRINT NAME Thomas Barto			<del></del>	/est_line		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:		<u>.                                      </u>				
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   PULL OR ALTERING CASING   COMMENCE DRILLING OPNS   PAND A   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   PAND A   CASING/C						
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PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   OTHER:   Location 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.   As thole 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, OUARTER/OUARTER 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.   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 remaining well on lease: all electrical service poles and lines have been removed from lease and well location, except for utility's distribution infrastructure.  When all work has been completed, return this form to the appropriate District office to schedule an inspection.  SIGNATURE   TITLE   Lastrachan   Seculist   DATE   M-23-17   TYPE OR PRINT NAME   Thomas Barton   E-MAIL:   thomas   barton@oxy.com   PHONE: 832-289-3623	— — — — — — — — — — — — — — — — — — —					
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When all work has been completed, return this form to the appropriate District office to schedule an inspection.  SIGNATURE						
TITLE Carstruction Specialist DATE 10-13-19  TYPE OR PRINT NAME Thomas Barton E-MAIL: thomas_barton@oxy.com PHONE: 832-289-3623	location, except for army 5 distributes	ii iiii asii astais.				
TYPE OR PRINT NAME Thomas Barton E-MAIL: thomas_barton@oxy.com PHONE: 832-289-3623	When all work has been completed, re	turn this form to the appropriate I	District office to sch	edule an inspection.		
For State Use Only	SIGNATURE 2	TITLE,	Construction Sp	DATE 6-22-19		
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APPROVED BY: Kerry Fortne TITLE (O. H DATE 11-25-19	For State Use Only		•	11101121		
17:	APPROVED BY:	futne	Co. A	DATE 11-25-19		

## **Boyle, Monica (Danos and Curole Marine Contractors)**

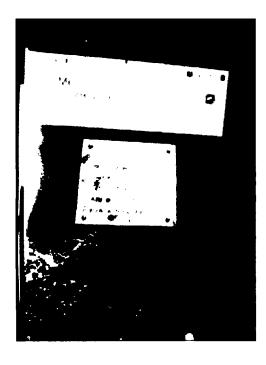
From: Sent: Monica Boyle <mvboyle3@gmail.com> Thursday, October 24, 2019 10:32 AM

To:

Boyle, Monica (Danos and Curole Marine Contractors)

Subject:

[EXTERNAL] PART\_1571755813933.jpg



Sent from my iPhone