RECEIVED

Submit One Copy To Appropriate District	State of New Me	rico Fi	EB 16 2011	Earns C 102
Office District I	Energy, Minerals and Natu		DBRSOCD	Form C-103 January 20, 2011
1625 N. French Dr., Hobbs, NM 88240	Energy, Minierals and Place	in resources; 10	WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION	DIVISION	30-005-20832 /	
District III 1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE		
District IV	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			LG-2464	
	ES AND REPORTS ON WELLS	3	7. Lease Name or Unit A	greement Name
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA" PROPOSALS.)			LOVELESS LQ STATE	
1. Type of Well: ⊠Oil Well □ 9	as Well 🔲 Other	:50	8. Well Number 7	
2. Name of Operator EnerVest Operating, L.L.C.	FRECE	NED	9. OGRID Number 143199	/
3. Address of Operator	x 77002 FEB 1	£ 5011 /	10. Pool name or Wildca	t /
1001 Fannin, Suite 800, Houston, TX	K 77002 FEB	TESIAL	TOMAHAWK (SAN AN	DRES)
4. Well Location Unit Letter M: 330' feet from the South Nilme and 990 feet from the West line				
Unit Letter M: 330' feet from the South Willing and 990 feet from the West line Section 36 Township 07S Range 31E NMPM County Chaves				
Scotlon 30	11. Elevation (Show whether DR			
Control of the Contro	4388' - GR	<u></u>		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INT		SUB	SEQUENT REPORT	·OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR			RING CASING 🔲 '	
	CHANGE PLANS MULTIPLE COMPL	COMMENCE DRI		A 📙
TOLE ON ALTEN GASING	MOCTIFIED COMP	CASING/CEIVIEN	, 10B	,
OTHER:		│	eady for OCD inspection a	fter 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, 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 a other production equipment.	nearly as possible to original grou	and contour and has l	been cleared of all junk, tra	sh, flow lines and
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✓ Pipelines and flow lines have bee			All fluids have been remo	wed 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, not to include primary service				
company equipment, has been removed from lease and well location. When all work has been completed, return this form to the appropriate District office to schedule an inspection.				
PLEASE LEAVE POWER LINE ONE DUE TO IT FEEDING THE OTHER WELLS IN THE LEASE. ***				
Resubmittal = failed inspection of	<u>n 12/29/10</u>			
SIGNATURE JUNE M De	make TITLE Regulator	ry Assistant	DATE 2/14/	/11
		nski@enervest.net	PHONE: _713-495-	
For State Use Only				
APPROVED BY: Y Conditions of Approval (if any):	SHOWN TITLE (ompliance	DATE DATE	41/1/2016
or repprover (ir uny).		•	<u> </u>	17