

Submit 1 Copy To Appropriate District Office  
District I – (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II – (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III – (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV – (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

OCD Received  
5/11/2020

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

|   |
|---|
| WELL API NO.<br>30-039-24191  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br>CA: NMNM71309   |
| 7. Lease Name or Unit Agreement Name<br>Wishing Well 35   |
| 8. Well Number<br>007   |
| 9. OGRID Number<br>371838   |
| 10. Pool name or Wildcat: W. Puerto Chiquito Mancos & WC DK   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>7255' GL                                      |

|   |  |
|---|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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-101) FOR SUCH PROPOSALS.)                  |  |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>  |  |
| 2. Name of Operator<br>DJR Operating, LLC   |  |
| 3. Address of Operator<br>1 Road 3263, Aztec, NM 87410-9521   |  |
| 4. Well Location<br>Unit Letter <u>G</u> : <u>2210'</u> feet from the <u>N</u> line and <u>2310</u> feet from the <u>E</u> line<br>Section <u>35</u> Township <u>24N</u> Range <u>01W</u> NMPM County <u>Rio Arriba</u> |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>7255' GL  |  |

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

| NOTICE OF INTENTION TO:                        |   | SUBSEQUENT REPORT OF:                            |  |
|--|---|--|--|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>           | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>       |  |
| DOWNHOLE COMMINGLE <input type="checkbox"/>    |   |  |  |
| CLOSED-LOOP SYSTEM <input type="checkbox"/>    |   |  |  |
| OTHER: <input type="checkbox"/>                |   | OTHER: RTP <input checked="" type="checkbox"/>   |  |

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

DJR Operating, LLC has returned this well to production as of 3/18/2020.

Current flow rate: 34.5 MCF

Spud Date: 12/20/1987 Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Shaw-Marie Ford TITLE Regulatory Specialist DATE 03/19/20

Type or print name Shaw-Marie Ford E-mail address: sford@djrlc.com PHONE: 505-632-3476

For State Use Only

APPROVED BY: Accepted for record TITLE  DATE

Conditions of Approval (if any): AV