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Form 3160-5 (April 2004)

UNITED STATES APR 24 2013 DEPARTMENT OF THE INTERIOR

FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007

SUNDRY NOTICES AND	REPORTISEON I	wand Managemer	5. Lease Serial No. NMNM-12335 6. If Indian, Allottee or	Tribe Name	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160 - 3 (APD) for such proposals.			N/A		
SUBMIT IN TRIPLICATE- Other instructions on reverse side.			7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well ☐ ☐ ☐ Gas Well ☐ ☐ ☐ Other			8. Well Name and No. South Hospah #51		
2. Name of Operator Dominion Production Company LLC.			9 API Well No.		
3a. Address: 1414 W. Swan Ave. Suite 100. Tampa Fl. 33606	- 3b. Phone No. (in 813-579-1188	clude area code)	3003120242 10. Field and Pool, or Ex	xploratory Area	
4. Location of Well (Footage, Sec., T., R. M., or Survey Description)			South Hospah		
1775' FNL & 620' FWL Section 12 17N 9W			11. County or Parish, State McKinley County, New Mexico		
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NA	TURE OF NOTICE, F	EPORT, OR OTHER	DATA	
TYPE OF SUBMISSION		TYPE OF ACTION			
Notice of Intent	Deepen Fracture Treat New Constructi	Production (St Reclamation	tart/Resume)		
☐ Final Abandonment Notice ☐ Convert to Injection ☐ Plug and Abandon ☐ Temporarily Abar ☐ Water Disposal			oandon		
following completion of the involved operations. If the operation is the steel that the site is ready for final inspection.) The South Hospah #51 Injection Well currently with 1648. Dominion Proposes to pull tubing/packer and Run Tubing/Packer and perform new MIT. Work	all be filed only after all red Il not take injection wat d wash well to 1648', re	uirements, including reclan er. It is currently perfor perforate across exsistin	nation, have been completed ated from from 1643'-16 g perforations at 6 SPF	and the operator has	
AMIT required to be with	ussed		Notify NMOCD 24 h prior to beginning operations	RCVD MAY 1 '1: 'OIL CONS. DIV DIST. 3	
· ,					
14. Thereby certify that the foregoing is true and correct Name (Printed/Typed) Mike Allen	Title	e Agent			
Signature ·		04/20/2013			
THIS SPACE FO	OR FEDERAL OF	R STATE OFFICE	USE		
Approved by Original Signed: Stephen Mason		Title	Date	APR 2 9 2013	
Conditions of approval, if any, are attached. Approval of this notice does not warrant certify that the applicant holds legal or equitable title to those rights in the subject least which would entitle the applicant to conduct operations thereon.		Office	,		
Fitle 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212 mal	ke it a crime for any perso	n knowingly and willfully	to make to any department	or agency of the United	

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)



If perforations are above or below existing perfs please file: c-104 and Completion Report to include new perfs before returning to production.