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	UNITED STATES DEPARTMENT OF THE I BUREAU OF LAND MANA	GEMENT	MAR 02 2		FORM APPROVED OM B No. 1004-0135 Expires: January 31, 2004		
SUNDRY NOTICES AND REPORTS ON WELLS TO DO NOT USE this form for proposals to drill or to re-enter and the abandoned well. Use Form 3160-3 (APD) for such proposals.				5. Lease Serie NM 123 6. 21f. Indiah N/A	35 . Allottee or Tribe Name		
SUBMIT IN TRIPLICATE- Other instructions on reverse side.					7. If Unit or CA/Agreement, Name and/or No.		
I Type of Well Oil Well				SHU 8. Well Name and No.			
2. Name of Operator Dominion Production Company, LLC					South Hospah 36 9. API Well No.		
3a Address 3b. Phone No. (include area code) 1414 W Swann Av, Suite 100, Tampa, FL 33606 832 545 4600				30-031-20118 10: Field and Pool, or Exploratory Area South Hospah 11. County or Parish, State			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)							
900 FNL & 2630 FEL Section-12- Township 17N- Range 09W				<u>,</u>	McKinley County, NM		
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA							
TYPE OF SUBMISSION TYPE OF ACTION				· — ·			
Notice of Intent	Acidize	Deepen Fracture Treat	Production (S	tart/Resume)	Water Shut-Off		
Subsequent Report	Casing Repair	New Construction	Recomplete		Other		
Final Abandonment Notice	Change Plans	Plug and Abandon Plug Back	Temporarily A				
If the proposal is to deepen dire Attach the Bond under which t following completion of the in	ted Operation (clearly state all pertine ectionally or recomplete horizontally, the work will be performed or provide volved operations. If the operation re inal Abandonment Notices shall be fil y for final inspection.)	, give subsurface location e the Bond No. on file esults in a multiple com	ons and measured and t with BLM/BIA. Requ pletion or recompletion	rue vertical depth red subsequent re in a new interval	is of all pertinent markers and zones. eports shall be filed within 30 days I, a Form 3160-4 shall be filed once		
Cement. Cement Bond L	mpany intends to run a 4.5" Line og will be run to verify top of cer tablish as an injection well.				with 250 sks of Premium Lite ker AD-1 Packer. Thereafter we		
Notify NMOCD 24 hrs prior to beginning operations	RECEIVE MAR 1 3 2019 NMOCD	5	ACTIO OPERA AUTHO	N DOES NOT TOR FROM (RIZATION R	OR ACCEPTANCE OF THIS RELIEVE THE LESSEE AND OBTAINING ANY OTHER EQUIRED FOR OPERATIONS INDIAN LANDS		
14. I hereby certify that the fore Name (Printed/Typed)	going is true and correct						
David Burns		Title F	President				
Signature		Date	2/27	12015	/		
THIS SPACE FOR FEDERAL OR STATE OFFICÉ USE							
	Attached. Approval of this notice do attached. Approval of this notice do attached title to those rights in the conduct operations thereon	bes not warrant or	Title PE	· [E	Date 3 10 2015		
Title 18 U.S.C. Section 1001 and Titl		crime for any person k s to any matter within i	nowingly and willfully	/ to make to any	department or agency of the United		

(Instructions on page 2)

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