

State of New Mexico  
Energy, Minerals and Natural Resources Department

**Susana Martinez**  
Governor

**Ken McQueen**  
Cabinet Secretary

**Matthias Sayer**  
Deputy Cabinet Secretary

**Heather Riley**, Division Director  
Oil Conservation Division



New Mexico Oil Conservation Division approval and conditions listed below are made in accordance with OCD Rule 19.15.7.11 and are in addition to the actions approved by BLM on the following 3160-4 or 3160-5 form.

Operator Signature Date: 6/4/18 Well information:

API WELL #	Well Name	Well #	Operator Name	Type	Stat	County	Surf_Owner	UL	Sec	Twp	N/S	Rng	W/E
30-039-22754-00-00	SAN JUAN 30 5 UNIT	074	HILCORP ENERGY COMPANY	G	A	Rio Arriba	F	K	34	30	N	5	W

Application Type:

☐ P&A    ☐ Drilling/Casing Change    ☐ Location Change

☒ **Recomplete/DHC** (For hydraulic fracturing operations review EPA Underground injection control Guidance #84; Submit Gas Capture Plan form prior to spudding or initiating recompletion operations)

☐ **Other:**

Conditions of Approval:

- Notify NMOCD 24hrs prior to beginning operations.
- Set cast iron bridge plug (CIBP) inside of cemented casing and at least 500' below the bottom of the proposed perforations. To show adequate formation/cement isolation.
- Perform and submit a cement bond log (CBL) to the agencies for review and approval prior to perforating the formation.
- If needed, submit proposed remediation to the agencies for review and approval prior to starting remediation.

NMOCD Approved by Signature

6/14/18  
Date

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

MAY 24 2018

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

**SUNDRY NOTICES AND REPORTS ON WELLS**  
**Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.**

SUBMIT IN TRIPLICATE - Other instructions on page 2.		5. Lease Serial No. <b>NMNM012332</b>
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator <b>Hilcorp Energy Company</b>		7. If Unit of CA/Agreement, Name and/or No. <b>San Juan 30-5 Unit 74</b>
3a. Address <b>382 Road 3100, Aztec, NM 87410</b>	3b. Phone No. (include area code) <b>505-599-3400</b>	9. API Well No. <b>30-039-22754</b>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>Surface Unit K (NESW) 1980' FSL &amp; 2100' FWL, Sec. 34, T30N, R05W</b>		10. Field and Pool or Exploratory Area <b>Gobernador PC/Blanco Mesaverde</b>
		11. Country or Parish, State <b>Rio Arriba, New Mexico</b>

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 must be filed once Testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Hilcorp Energy Company plans to add pay to the subject well in the Pictured Cliffs formation and downhole commingle with the Mesaverde formation per the attached procedure & current wellbore schematic. The DHC1761AZ is approved. A Closed Loop system will be utilized.

NMOCD

MAY 30 2018

DISTRICT III

SEE ATTACHED  
FOR CONDITIONS  
OF APPROVAL

BLM'S APPROVAL OR ACCEPTANCE OF THIS  
ACTION DOES NOT RELIEVE THE LESSEE AND  
OPERATOR FROM OBTAINING ANY OTHER  
AUTHORIZATION REQUIRED FOR OPERATIONS  
ON FEDERAL AND INDIAN LANDS

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) <b>Tammy Jones</b>		Title <b>Operations/Regulatory Technician - Sr.</b>
Signature <i>Tammy Jones</i>		Date <b>5/24/2018</b>

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by <i>William Tambeken</i>	Title <i>Petroleum Engineer</i>	Date <b>5/29/2018</b>
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office <b>FFD</b>

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person 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.

NMOCD

**District I**

1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720

**District II**

811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 748-9720

**District III**

1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170

**District IV**

1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico**  
**Energy, Minerals and Natural**  
**Resources**  
**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**

Form C-102

August 1, 2011

Permit 252788

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

1. API Number 30-039-22754	2. Pool Code 77440	3. Pool Name GOVERNADOR PICTURED CLIFFS (GAS)
4. Property Code 318433	5. Property Name SAN JUAN 30 5 UNIT	6. Well No. 074
7. OGRID No. 372171	8. Operator Name HILCORP ENERGY COMPANY	9. Elevation 6857

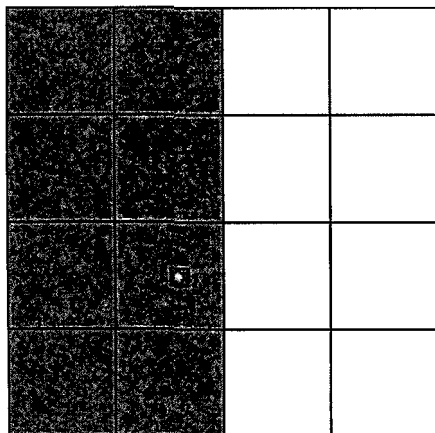
**10. Surface Location**

UL - Lot K	Section 34	Township 30N	Range 05W	Lot Idn	Feet From 1980	N/S Line S	Feet From 2100	E/W Line W	County RIO ARRIBA
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**11. Bottom Hole Location If Different From Surface**

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
12. Dedicated Acres 320.00	W/2			13. Joint or Infill		14. Consolidation Code		15. Order No.	

**NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION**

**OPERATOR CERTIFICATION**

*I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location(s) or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.*

E-Signed By: *Tammy Jones*  
Title: Operations/Regulatory Technician - Sr.  
Date: 5/24/2018

**SURVEYOR CERTIFICATION**

*I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.*

Surveyed By: Fred B. Kerr Jr.  
Date of Survey: 4/1/1981  
Certificate Number: 3950



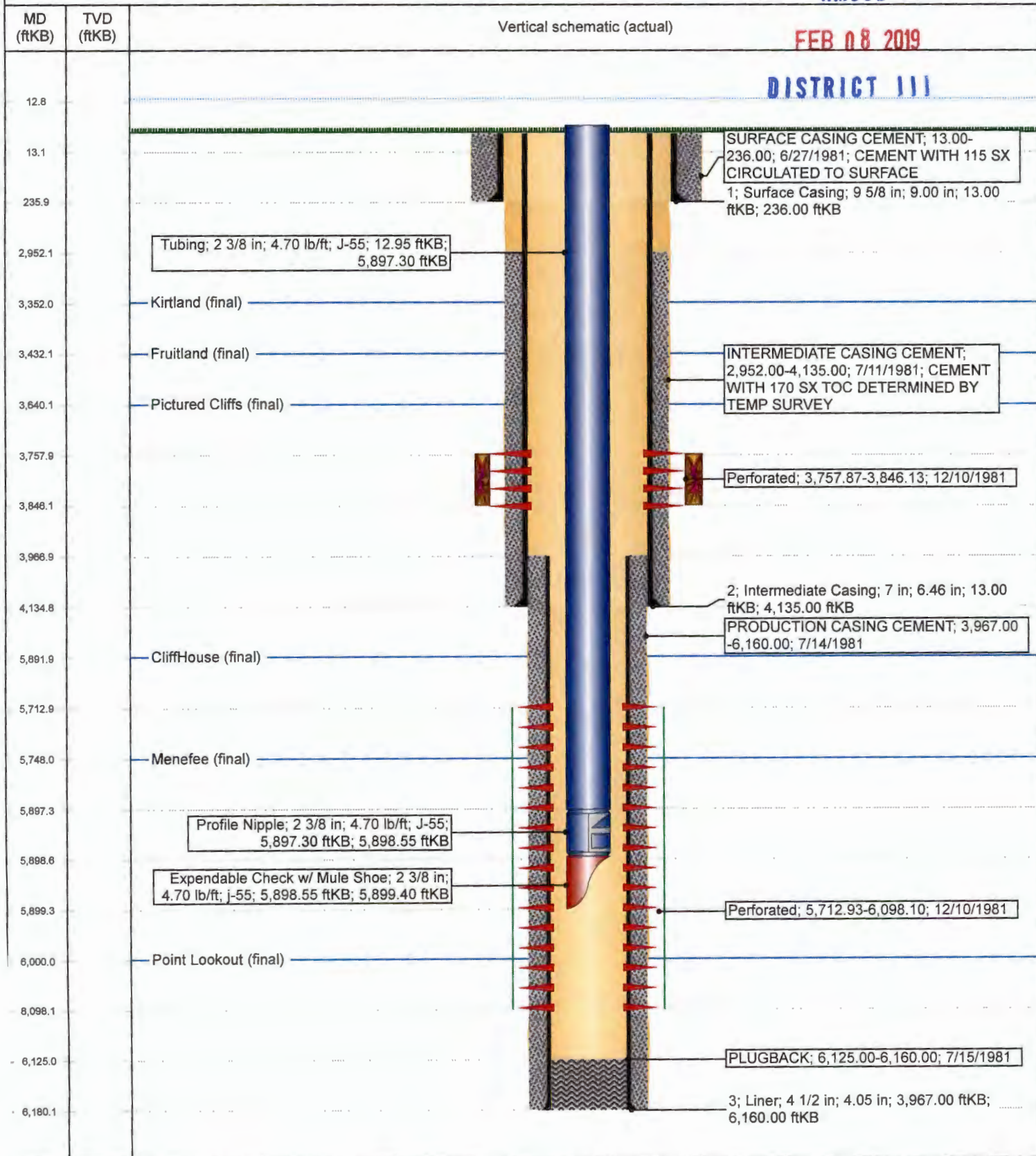
**HILCORP ENERGY COMPANY**  
**San Juan 30-5 Unit 74**  
**PICTURED CLIFFS PAY ADD SUNDRY**

**JOB PROCEDURES**

1. MIRU service rig and associated equipment; test BOP.
2. TOOH with 2 3/8" tubing set at 5,899'.
3. Set a 7" cast iron bridge plug at +/- 3,750' to isolate the PC/Mesa Verde. Note: TOC at 2,952' by TEMP SURVEY.
4. Load the hole and pressure test the casing to frac pressure.
5. N/D BOP, N/U frac stack and test frac stack to frac pressure.
6. Perforate and frac the Pictured Cliffs in a single stage (Top Perforation @ 3,644'; Bottom Perforation @ 3,744').
7. Isolate frac stage with a composite bridge plug.
8. Nipple down frac stack, nipple up BOP and test.
9. TIH with a mill and drill out top Pictured Cliffs isolation plug.
10. Clean out to PC/Mesa Verde isolation plug and, when water and sand rates are acceptable, flow test the Pictured Cliffs.
11. Drill out PC/Mesa Verde isolation plug and cleanout to PBTD of 6,160'. TOOH.
12. TIH and land production tubing. Get a commingled Mesa Verde/Pictured Cliffs flow rate.

**Well Name: SAN JUAN 30-5 UNIT #74**

API / UWI 3003922754	Surface Legal Location 034-030N-005W-K	Field Name PC/MV DUAL	Route 1204	State/Province NEW MEXICO	Well Configuration Type Vertical
Ground Elevation (ft) 6,852.00	Original KB/RT Elevation (ft) 6,865.00	KB-Ground Distance (ft) 13.00	KB-Casing Flange Distance (ft)	KB-Tubing Hanger Distance (ft)	

**Vertical, Original Hole, 2/7/2019 2:12:26 PM**
**NMOCD**
**FEB 08 2019**
**DISTRICT III**




# United States Department of the Interior

## BUREAU OF LAND MANAGEMENT

Farmington District Office  
6251 College Blvd. - Suite A  
Farmington, New Mexico 87402  
[www.blm.gov/nm](http://www.blm.gov/nm)



### ***CASING REPAIR, WORKOVER, AND RECOMPLETION CONDITION OF APPROVAL***

1. If casing repair operations are needed, obtain prior approval from this office before commencing repairs.
2. If a CBL or other logs are run, provide this office with a copy.
3. After any casing repair operations, test cement squeeze to a minimum of 500# for 30 minutes with no more than 10 % pressure fall off in the 30 minutes test period. Provide test chart with your subsequent report of operations.
4. A properly functioning BOP and related equipment must be installed prior to commencing workover, casing repair, and/or recompletion operations.
5. Contact this office at (505) 564-7750 prior to conducting any cementing operations.

#### ***SPECIAL STIPULATIONS:***

1. **Pits will be fenced during work-over operation.**
2. **All disturbance will be kept on existing pad.**
3. **All pits will be pulled and closed immediately upon completion of the recompletion and work-over activities.**
4. **Pits will be lined with an impervious material at least 12 mils thick.**