1220 S. St. Francis Dr., Santa Fe, NM

87505

PROPOSALS.) 1. Type of Well:

2. Name of Operator

3. Address of Operator

Hilcorp Energy Company

382 Road 3100 Aztec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources

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

Other

NMOCD

SUNDRY NOTICES AND REPORTS ON WELLS

Gas Well

(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

Oil Well

	Form C-103
	Revised July 18, 2013
	WELL API NO.
	30-045-23729
	5. Indicate Type of Lease
	STATE FEE X
	6. State Oil & Gas Lease No.
	FEE
	7. Lease Name or Unit Agreement Name
	KEYS GAS COM D
	8. Well Number 1E
	9. OGRID Number
	372171
	10. Pool name or Wildcat
	MV - BLANCO::MESAVERDE
SAN JUAN COUNTY	

MAY 09 2019 DISTRICT 111 4. Well Location Unit Letter 1 Footage 1810' FNL & 1030' FWL Section 29 Township 029N Range 010W 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5531' GR 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON** CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: OTHER: - Redelivery 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. This well was re-delivered on 5/6/2019 and produced natural gas and entrained hydrocarbons. Notes: THIS WELL WAS RECOMPLETED TO THE MESAVERDE & COMMINGLED WITH THE EXISTING DAKOTA. TP: 675 CP: 1142 Initial MCF: 172 Meter No.: 22050 Gas Co.: HEC Proj Type.: RECOMPLETE Spud Date: Rig Released Date: 11/7/1979 I hereby certify that the information above is true and complete to the best of my knowledge and belief. **SIGNATURE** TITLE Operations/Regulatory Tech - Sr. **DATE** 5/8/2019 Type or print name Christine Brock E-mail address: cbrock@hilcorp.com PHONE: 505.324.5155 copped for second APPROVED BY: DATE Conditions of Approval (if any):