#### State of New Mexico Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham Governor

Sarah Cottrell Propst Cabinet Secretary

Todd E. Leahy, JD, PhD Deputy Secretary Adrienne Sandoval, 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: 3/15/19 Well information: Hilcorp Energy San Juan 27-4 Unit #60F, API# 30-039-30203
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:
<ul> <li>See the revised sundry received by the OCD on 6/6/19 which included corrected PC perforations to ensure they were in formation.</li> </ul>

NMOCD processed by

6-6-19 Date Form 3160-5 (August 2007)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

5
FORM APPROVED
OMB No. 1004-0137 RECEIVED
Expires: July 31, 2010

5. Lease Serial No.

6. If Indian, Allottee or Tribe Name

NMSF080674

R 18 2019

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

Farmington Field Office

abandoned	well. Use Form 3160-3 (A	PD) for s	uch propo	sals.		Bureau of Land Managemen
SUI	BMIT IN TRIPLICATE - Other inst	tructions on	page 2.		7. If Unit of CA/Agreement, 1	Name and/or No.
1. Type of Well						
Oil Well X	Gas Well Other				8. Well Name and No.  San Jui	an 27-4 Unit 60F
2. Name of Operator	III				9. API Well No.	000 00000
3a. Address	Hilcorp Energy Compa		o. (include area	a aada)	10. Field and Pool or Explora	-039-30203
382 Road 3100, Aztec, N	M 87410		05-599-340			red Cliffs/Basin Dakota
4. Location of Well (Footage, Sec., T.,R.					11. Country or Parish, State	- January Bushing Burketta
	WSE) 180' FSL & 2060' FE	EL, Sec. 2	1, T27N, R	04W	Rio Arriba	, New Mexico
12. CHECK T	HE APPROPRIATE BOX(ES)	TO INDICA	ATE NATUR	RE OF NO	TICE, REPORT OR OTH	IER DATA
TYPE OF SUBMISSION			TYP	E OF AC	TION	
X Notice of Intent	Acidize	Deepen		F	Production (Start/Resume)	Water Shut-Off
	Alter Casing	Fracture	Treat		Reclamation	Well Integrity
Subsequent Report	Casing Repair	New Co	nstruction	XF	Recomplete	Other
	Change Plans	Plug an	d Abandon		Cemporarily Abandon	
Final Abandonment Notice	Convert to Injection	Plug Ba			Water Disposal	
13. Describe Proposed or Completed Op	eration: Clearly state all pertinent det	ails, including	g estimated star	rting date of	any proposed work and approx	ximate duration thereof.
the existing Dakota. Att	y plans to recomplete the ached is the PC C102, red prior to commingling. A disturbing activities.	complete closed lo	procedure	& wellb	ore schematic. The I	DHC application will be amation will be
14 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A No. of Proceedings	71				
14. I hereby certify that the foregoing is	true and correct. Name (Printed/Typ	nea)				
Etta Trujillo			Title Ope	erations/F	Regulatory Technician -	- Sr.
Signature Etta	Ingito		Date		3/15/201	19
	THIS SPACE FO	R FEDER	AL OR ST	ATE OF	FICE USE	
Approved by  Conditions of approval, if any, are attack	we Mankiewia	Carrant or ce	M	Title	AFM	Date 4/5/19
that the applicant holds legal or equitable entitle the applicant to conduct operation	e title to those rights in the subject le	ase which wo	uld	Office	FFO	
Title 18 U.S.C. Section 1001 and Title 4	3 U.S.C. Section 1212, make it a crit	me for any pe	son knowingly	and willful	ly to make to any department of	r agency of the United States any

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

" 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 265059

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30-039-30203	2. Pool Code 85920	3. Pool Name TAPACITO PICTURED CLIFFS (PRO GAS)
4. Property Code	5. Property Name	6. Well No.
319210	SAN JUAN 27 4 UNIT	060F
7. OGRID No.	8. Operator Name	9. Elevation
372171	HILCORP ENERGY COMPANY	6838

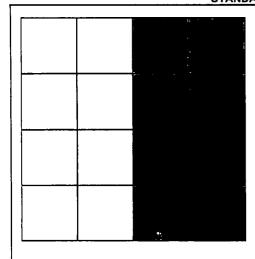
10. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County	
	21	27N	04W	Į.	180	S	2060	E	RIO	ARRIBA
				i						

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 A	.cres .00 E/2		13. Joint or Infill		14. Consolidatio	n 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: Etta Trujillo

E-Signed by. Cut Trujut

Title: Operations/Regulatory Tech Sr

Date: 03/15/2019

#### 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:

Henry P. Broadhurst

Date of Survey:

7/25/2006

Certificate Number:

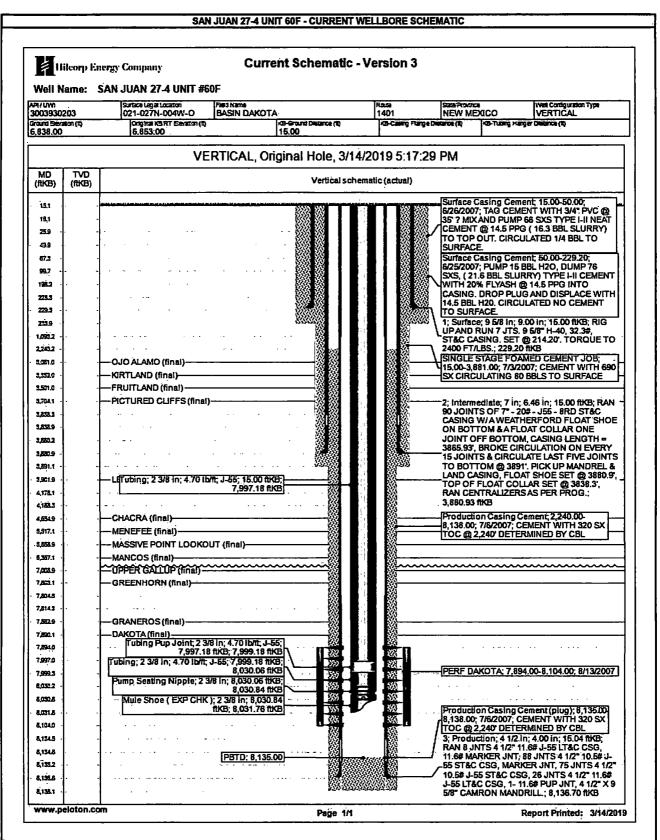
11393



#### JOB PROCEDURES

- 1. MIRU service rig and associated equipment; test BOP.
- 2. TOOH with 2-3/8" tubing set at 8,032'.
- 3. Set a 4-1/2" plug at +/- 7,844' to isolate the Dakota. (Note: TOC at 2,240' by CBL)
- 4. Load the hole and perform MIT (Pressure test to 560 psi).
- 5. Set a 4-1/2" plug at +/- 3,880'.
- 6. Load the hole and pressure test the casing.
- 7. N/D BOP, N/U frac stack and pressure test frac stack.
- 8. Perforate and frac the Pictured Cilffs formation (Top Perforation @ 3,704'; Bottom Perforation @ 3,780').
- 9. Isolate frac stage with a plug.
- 10. Nipple down frac stack, nipple up BOP and test.
- 11. TIH with a mill and drill out top isolation plug and Picture Cliffs frac plug .
- 12. Clean out to Dakota isolation plug.
- 13. Drill out Dakota isolation plug and cleanout to PBTD of 8,135'. TOOH.
- 14. TIH and land production tubing. Get a commingled Dakota/Pictured Cliffs flow rate.





Form 3160-5 (August 2007)

#### **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

RECEIVED

FORM APPROVED OMB No. 1004-0137

Expires: July 31, 2010

				5. Lease Serial No.	SE000674
SIIN	DRY NOTICES AND REP	ORTS ON WELLS	C arr	6. If Indian, Allottee or Tribe N	SF080674
	this form for proposals			V. M. Marian, 7 mones of 11100 11	umo
	well. Use Form 3160-3 (A				
	BMIT IN TRIPLICATE - Other ins	structions on page 2.		7. If Unit of CA/Agreement, Na	ame and/or No.
1. Type of Well Oil Well	Gas Well Other			8. Well Name and No.  San Jua	n 27-4 Unit 60F
2. Name of Operator				9. API Well No.	
	Hilcorp Energy Compa				39-30203
3a. Address 382 Road 3100, Aztec, N	M 87410	3b. Phone No. (include area co 505-599-3400	de)	10. Field and Pool or Explorato <b>Tapacito Picture</b>	ry Area ed Cliffs/Basin Dakota
4. Location of Well (Footage, Sec., T.,R Surface Unit O (S	.,M., or Survey Description) WSE) 180' FSL & 2060' FI	EL, Sec. 21, T27N, R04	w	11. Country or Parish, State  Rio Arriba ,	New Mexico
12. CHECK T	HE APPROPRIATE BOX(ES)	) TO INDICATE NATURE (	OF NOT	TICE, REPORT OR OTHE	R DATA
TYPE OF SUBMISSION		TYPE (	OF AC	TION	
X Notice of Intent	Acidize	Deepen	P	roduction (Start/Resume)	Water Shut-Off
	Alter Casing	Fracture Treat	R	eclamation	Well Integrity
Subsequent Report	Casing Repair	New Construction	X R	ecomplete	X Other
61	Change Plans	Plug and Abandon	T	emporarily Abandon	Revised Perfs
Final Abandonment Notice	Convert to Injection	Plug Back	W W	later Disposal	
Attach the bond under which the w following completion of the involve	nally or recomplete horizontally, given ork will be performed or provide the ed operations. If the operation result Abandonment Notices must be filed	e subsurface locations and measu Bond No. on file with BLM/BIA s in a multiple completion or reco	red and to Require Completion	rue vertical depths of all pertine ed subsequent reports must be fi n in a new interval, a Form 3160	nt markers and zones. iled within 30 days -4 must be filed once
the existing Dakota. Att	y plans to recomplete the ached is the PC C102, re	complete procedure &	wellbo	ore schematic. The DI	HC application will be

submitted and approved prior to commingling. A closed loop system will be utilized. Interim reclamation will be performed after surface disturbing activities.

> Notify NMOCD 24 hrs prior to beginning operations

SEE ATTACHED FOR CONDITIONS OF ADDDOVAL

HOLD CLOU FOR DHC

MMOCD

111N R. 6 2019

	OF APPRO	_nis	IKIGI II		
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)					
Etta Trujillo	Title	Operations/Regulator	y Technician - S	Sr.	
Signature EAR 2 The	Date		4/12/2019	9	
THIS SPACE FOR FE	DERAL O	R STATE OFFICE US	E		
Approved by		Title Petr.	Eng	Date 6	19
Conditions of approval, if any, are attached. Approval of this notice does not warran that the applicant holds legal or equitable title to those rights in the subject lease wh entitle the applicant to conduct operations thereon.		Office	J	·	
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for	any person kno	wingly and willfully to make to	any department or	agency of the United Stat	tes any

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



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# 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 265059

ъ.

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30-039-30203	2. Pool Code 85920	3. Pool Name TAPACITO PICTURED CLIFFS (PRO GAS)
4. Property Code 319210	5. Property Name SAN JUAN 27 4 UNIT	6. Well No. 060F
7. OGRID No. 372171	8. Operator Name HILCORP ENERGY COMPANY	9. Elevation 6838

10. Surface Location

UL - Lot O	Section 21	Township 27N	Range 04W	Lot Idn	Feet From 180	N/S Line S	Feet From 2060	E/W Line E	County RIO	ARRIBA
		1						ľ		

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 A 320	cres .00 E/2		13. Joint or Infill		14. Consolidatio	n Code		· 15. Order No.	

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-		
	*:	

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E-Signed By: Etta Trujillo

Title: Operations/Regulatory Tech Sr

Date: 03/15/2019

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Surveyed By:

Henry P. Broadhurst

Date of Survey:

7/25/2006

Certificate Number:

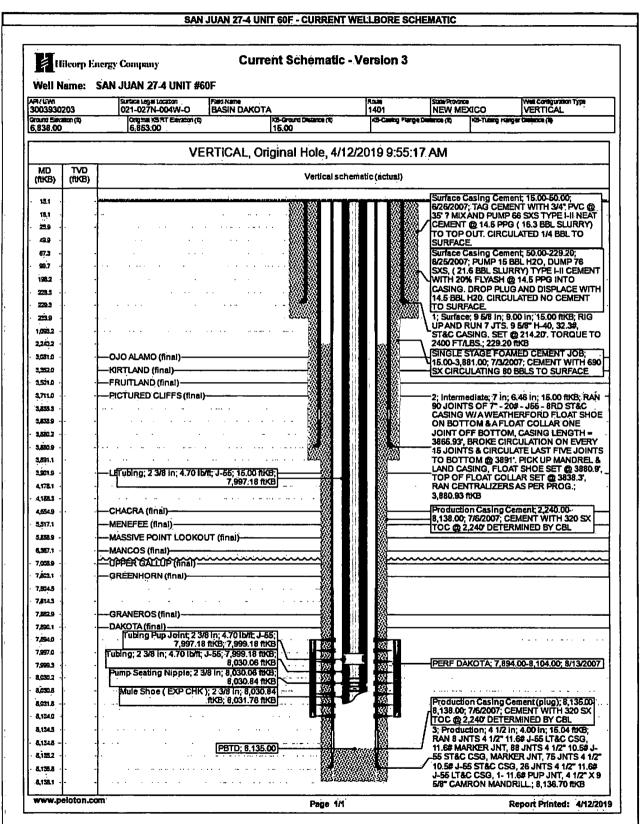
11393



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## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT FARMINGTON DISTRICT OFFICE

6251 COLLEGE BLVD.
FARMINGTON, NEW MEXICO 87402

Attachment to notice of Intent to Recomplete and Commingle Well: San Juan 27-4 Unit , #60F CONDITIONS OF APPROVAL

1. Contact BLM Inspection and Enforcement @ (505) 564-7750, 24 hours prior to conducting MIT work so an Inspector can be present to witness the MIT.

Contact Jim Lovato, Petroleum Engineer @ (505) 564-7746 or Cell # @ (505) 320-7378 to discuss failed MIT results and/or your remedial action and isolation plans.

Submit the electronic copy of the MIT Test Chart and CBL for verification to the following addresses: jlovato@blm.gov and Brandon.Powell@state.nm.us

- 2. The following modifications to your recompletion program are to be made:
  - a) Upon rigging up, record Bradenhead pressure and monitor same during recompletion operations. Notify BLM and NMOCD if anomalous pressure changes occur. Provide monitoring results on the Subsequent Report of Operations.
  - b) Casing pressure test for fracture stimulation operations cannot exceed the internal yield strength of the casing including a 20% safety factor unless a waiver is granted. Stimulation operations cannot exceed this test pressure.
- 3. File Well test and Recompletion results within 30 days of completing recompletion operations.

Office Hours: 7:45 a.m. to 4:30 p.m.