Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OH CONCEDIATION DIVICION		30-045-35765
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505			V-8985
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name	
(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		Split Lip	
PROPOSALS.)		8. Well Number	
1. Type of Well: Oil Well Gas Well Other			1
2. Name of Operator		9. OGRID Number	
Dugan Production Corp. 3. Address of Operator		006515 10. Pool name or Wildcat	
P.O. Box 420, Farmington, NM 87499-0420		Basin Fruitland Coal	
4. Well Location			
Unit Letter P : 914 feet from the South line and 847 feet from the East line			
Section 32 Township 24N Range 11W NMPM San Juan County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6200' GR			
12. Check Appropriate Box 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			LING OPNS. PAND A
PULL OR ALTER CASING			
DOWNHOLE COMMINGLE			
CLOSED-LOOP SYSTEM OTHER:	П	OTHER: First deli	vered 🖂
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.			
	ompietion.		
Well first delivered 5/17/19.			
			NMOCD
			MAY 3 1 2019
			DISTRICT NAME
Spud Date:	Rig Release Da	ite:	DIOINIUI III
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
0			
SIGNATURE CONTRACTOR	TITLE Engine	eering Supervisor	DATE_May 29, 2019
Type or print name Aliph Reena E-mail address: aliph.reena@duganproduction.com PHONE: 505-325-1821			
ACCEPTED FOR RECORD			
APPROVED BY:	TITLE		DATE
Conditions of Approval (if any):	12		