Submit 1 Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources	Form C-103 Revised July 18, 2013			
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283		WELL API NO. 30-045-30606			
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease			
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.			
1220 S. St. Francis Dr., Santa Fe, NM 87505					
SUNDRY NOTI (DO NOT USE THIS FORM FOR PROPOS	7. Lease Name or Unit Agreement Name				
DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	McDaniel B				
1. Type of Well: Oil Well	8. Well Number				
Name of Operator Dugan Production Corp.	9. OGRID Number 006515				
3. Address of Operator		10. Pool name or Wildcat Fulcher			
PO Box 420, Farmington, NM 874 4. Well Location	99-0420	Basin Dakota (71599) Kutz P.C.			
	eet from the <u>South</u> line and <u>820</u> feet from t	the West line			
	Township 29N Range 11W NN	APM San Juan County			
	11. Elevation (Show whether DR, RKB, RT, GR, 6 5550' GL	etc.)			
		Enderstand and the state of the			
12. Check A	appropriate Box to Indicate Nature of Notice	ce, Report or Other Data			
NOTICE OF IN		JBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK TEMPORARILY ABANDON	PLUG AND ABANDON REMEDIAL WO	ORK			
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMI				
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM					
OTHER: Well name cha					
	leted operations. (Clearly state all pertinent details, rk). SEE RULE 19.15.7.14 NMAC. For Multiple (
proposed completion or reco		completions. Attach wendore diagram of			
Operator requests to change well nam	ne from McDaniel B #2 to McDaniel B Com #2. C	-102 is attached.			
		NMOCD			
	CO.	CT 2 1 2019			
		TRICT III			
		TRIOI III			
Spud Date:	Rig Release Date:				
Proposte ac	1 Doniosso 1 . Obs	110 5011.0			
I hereby certify that the information a	above is true and complete to the best of my knowle	edge and belief.			
SIGNATURE	TITLE Engineering Superviso	rDATE10/17/19			
Type or print name _Aliph Reena					
APPROVED BY: Descriptions of Approval (if any):					

X

District I
1625 N. French Dr., Hobbs, NM 88240
Phone (575) 393-6161 Fax: (575) 393-0720
District II
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District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505

Form C-102 Revised August 1, 2011 Submit one copy to appropriate District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-045-30606			² Pool Code 77200		³ Pool Name					
					Fulcher Kutz PC					
⁴ Property Code			⁵ Property Name				⁶ Well Number			
027849				McDaniel B Com					2	
⁷ OGRID No.				8 Operator Name					⁹ Elevation	
00651	5	Dugan Production Corp. 555						5550' GL		
	•				¹⁰ Surface	Location		•		
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
M	17	29N	11W		850	South	820	West	San Juan	
			" Bo	ttom H	ole Location If	Different From	n Surface			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	
12 Dedicated Acres	13 Joint o	r Infill	Consolidation	Code 15	Order No.					
160.0-SW/2										

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.

16		17 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 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. Signature Date
		Tyra M. Feil Printed Name tyrafeil@duganproduction.com E-mail Address
Fee	17	*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. Survey date 3/10/01 Date of Survey
820'	NM019405	Signature and Seal of Professional Surveyor:
850		Surveyed by Edgar L. Risenhoover, Certificate Number 5979 Certificate Number