

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

WELL API NO. 30-025-03727
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: Snyder "A"
8. Well No. 1
9. Pool name or Wildcat Townsend Wolfcamp
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3963.8 DF

SUNDRY NOTICES AND REPORTS ON WELLS
(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 PROPOSALS.)

1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator Energen Resources Corporation
3. Address of Operator 3300 N. "A" St., Bldg 4, Ste. 100, Midland, TX 79705	4. Well Location Unit Letter <u>T</u> : <u>2318</u> feet from the <u>South</u> line and <u>330</u> feet from the <u>West</u> line Section <u>6</u> Township <u>16-S</u> Range <u>36-E</u> NMPM Lea County
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

12/3/02 Prepared to run plug and begin blow down on well. Well would not blow down. Engineering department is looking at zones behind pipe. Will blow down well, set plug and test casing after evaluation.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Sharon Hindman TITLE Regulatory Analyst DATE 12/6/2002

Type or print name Sharon Hindman Telephone No. 915 684-3693

(This space for State use)

APPROVED BY STATE MANAGER TITLE STATE MANAGER DATE 12/6/2002

Conditions of approval, if any:



District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
100 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Form C-104A
March 19, 2001

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Submit 1 copy of the final affected wells
list along with 1 copy of this form per
number of wells on that list to appropriate
District Office

Change of Operator

Previous Operator Information:

OGRID: 162928
Name: Energen Resources Corporation
Address: 3300 N. A. ST BLDG 4 STE 100
Address: _____
City, State, Zip: MIDLAND TEXAS 79705

New Operator Information:

Effective Date: 5/01/2003
New Ogrid: 210091
New Name: D K D, LLC
Address: P O Box 682
Address: _____
City, State, Zip: Tatum New Mexico 88267

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information on this form and the attached list of wells is true and complete to the best of my knowledge and belief.

New Operator

Signature: Danny R. Watson

Printed name: DANNY R. WATSON

Title: President

Date: 5/22/03

Phone: 505 398-3490

Previous operator complete below:

Previous

Operator: Energen Resources Corporation

Previous

OGRID: 162928

Signature: Paul M Callaway

Printed

Name: Paul M Callaway

NMOCD Approval

Signature: Paul F. Kuerst

Printed

Name: Paul F. Kuerst

PETROLEUM ENGINEER

District: _____

Date: JUN 19 2003

Submit 3 Copies To Appropriate District Office
District I
15 N. French Dr., Hobbs, NM 88240
District II
11 W. Grand Ave., Artesia, NM 88210
District III
10 Rio Brazos Rd., Aztec, NM 87410
District IV
15 St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural
Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-025-0372700-00
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Synder "A"
8. Well Number #1
9. OGRID Number 210091
10. Pool name or Wildcat Upper Per Mo Penn Code 59847
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3963.8 DF

SUNDRY NOTICES AND REPORTS ON WELLS
DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT
SERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)
Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

Name of Operator

DKD L.L.C.

Address of Operator

P. O. Box 682 Tatum, New Mexico 88267

Well Location

Unit Letter T: 231 feet from the FSL line and 330 feet from the West line

Section 6 Township 16 S Range 36E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3963.8 DF

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mill Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING ORNS. ☐ P. AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Rig Up Pulling Unit on 8/24/04; Run Tubing down to 10,541
to S.N.; Run Rods and Pump. Wait on electricity to be
hooked up. Started Well Pumping on 8/31/04.



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Danny R. Watson

TITLE President

DATE 9/14/04

Type or print name Danny R. Watson

E-mail address: _____

Telephone No. _____

For State Use Only Harry W. Wink

OCD FIELD REPRESENTATIVE II/STAFF MANAGER

SEP 22 2004

District I
1625 N. French Dr., Hobbs, NM 88240

District II
1301 W. Grand Ave., Alamogordo, NM 88310

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

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

DEC 9 2005

WELL API NO. 30-025-0372700-00
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Snyder "A"
8. Well Number #1
9. OGRID Number 210091
10. Pool name or Wildcat Code 59847 Upper Per Mo Penn

<p>GENERAL NOTICES AND REPORTS ON WELLS (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 PROPOSALS.)</p>	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator DKD, L.L.C.	
3. Address of Operator P.O. Box 682 Tatum, NM 88267	
4. Well Location Unit Letter T 2318 feet from the FSL line and 330 feet from the West line Section 6 Township 16S Range 36E NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3963.8 DF	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

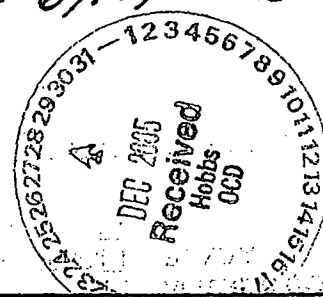
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input checked="" type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

I will submit a plugging procedure in the future. But due to unavailability of plugging units at this time, I don't have a time frame for when I can get it done. But I will check with other companies to see what's available. I would like to see if I could get an extension for 1 year.

CD 6 mos. - 6/15/2006



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Danny R. Watson TITLE Owner DATE 12/15/05

Type or print name
For State Use Only Danny R. Watson

E-mail address: Telephone No. 505-398-3490

APPROVED BY: Danny R. Watson TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER
Conditions of Approval (if any) DATE