

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-103
Revised July 18, 2013

WELL API NO. 30-025-42628
Indicate Type of Lease
STATE ☐ FEE ☐ FEDERAL ☒
Oil & Gas Lease No. NMLC029509A

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other: Acid Gas Injection Well <input checked="" type="checkbox"/>	7. Lease Name or Unit Agreement Name Maljamar AGI
2. Name of Operator Durango Midstream	8. Well Number #2
3. Address of Operator 2002 Timberloch, Suite 110, Woodlands, TX 79096	9. OGRID Number 221115
4. Well Location Unit Letter <u>O</u> : <u>400</u> feet from the SOUTH line and <u>2,100</u> feet from the EAST line Section <u>21</u> Township <u>17S</u> Range <u>32E</u> NMPM County <u>Lea</u>	10. Pool name or Wildcat AGI: Wolfcamp
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4,019 (GR)	

12. 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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Mechanical Integrity Test <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work).

The MIT was conducted on Monday, July 22, 2019 at 11:00 am (MT). Kerry Fortner (NMOCD) was on site to witness and approve the test, and conduct a Bradenhead Test. Below is a step-by-step summary and results:

- The annular space pressure between casing and tubing was 350 psig at the casing valve prior to the start of the MIT; approximately 63% of the total TAG stream was being injected in AGI #2 at 2,320 psig.
- The annular space pressure was closed to the well while attaching the diesel pump and calibrated chart recorder.
- At 11:09 am diesel was added to the line from the pump truck and chart recorder while opening the valve to the well.
- At 11:11 am the annulus pressure reached 550 psig, the chart recorder and well was then isolated from the truck.
- The MIT began at 11:12 am and the chart recorded the annular pressure until 11:44 am (32 minutes).
- The annulus pressure dropped from 550 to 535 psig; a loss of 15 psig (2.7% decrease) by the end of the test.
- Diesel was then bled from the well annulus to the truck. At 400 psig (final annulus pressure) the valve to the well was shut and the remaining pressure was bled to the truck prior to disconnection of the line and chart.

In addition to the MIT, a Bradenhead test was conducted by the NMOCD by removing the gauges and bleeding pressure from the annular space between the surface/intermediate #1 casings (32 psig), intermediate #1/#2 casings (0 psig), and intermediate #2/production casings (35 psig).

Please see the attached MIT pressure chart (approved by NMOCD), calibration sheet, and Bradenhead test documentation.

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

SIGNATURE Dale T Littlejohn TITLE Consultant to Durango Midstream DATE 7/23/19

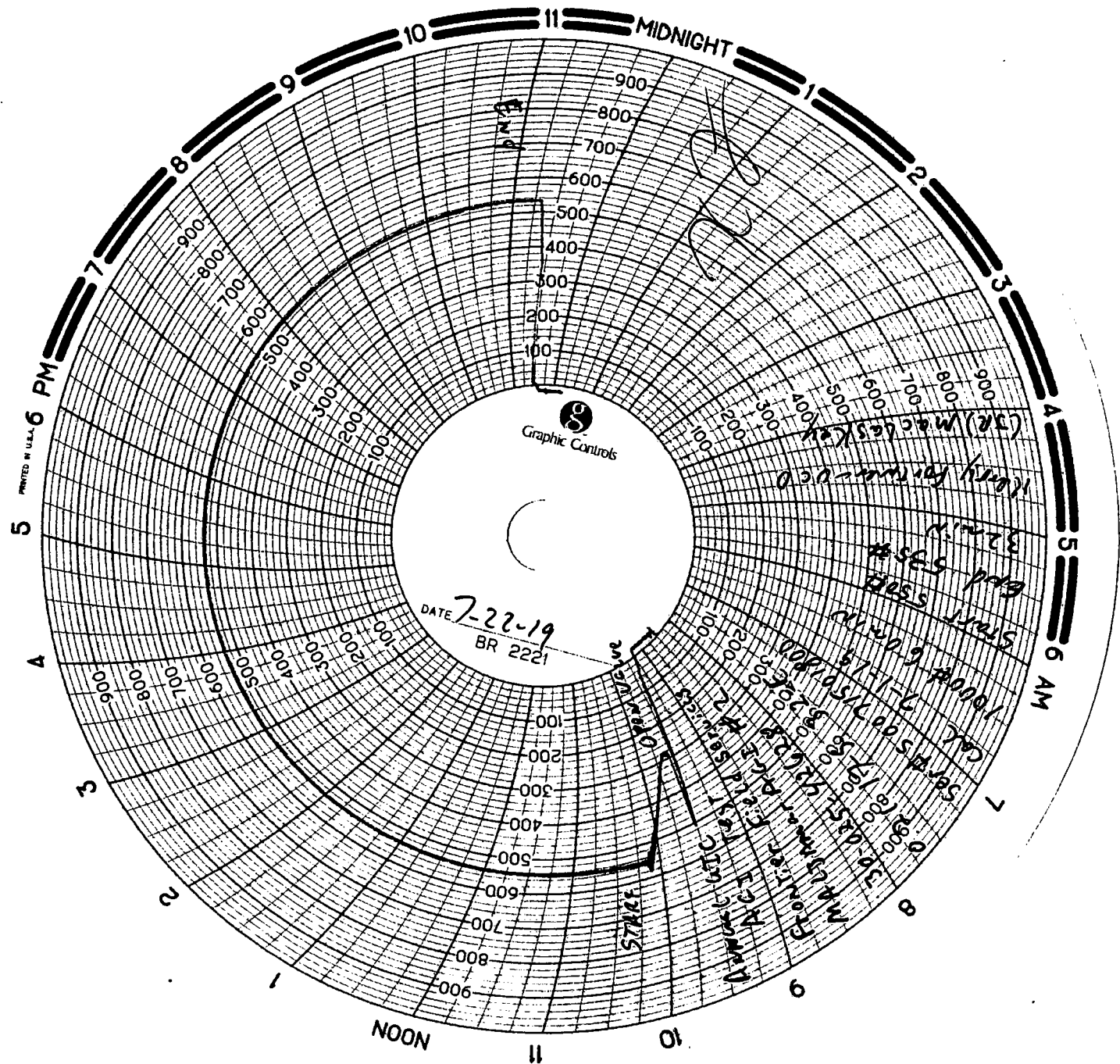
Type or print name Dale T Littlejohn E-mail address: dale@geolex.com PHONE: 505-842-8000

For State Use Only
APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 7-24-19
Conditions of Approval (if any):

HOBBS OGD
9/4/2019

RECEIVED

JUL 24 2019



HOBBS OCD

JUL 24 2019

MACLASKEY OILFIELD SERVICES

5900 WEST LOVINGTON HWY. HOBBS, NM 88240

505-355-1016

THIS IS TO CERTIFY THAT:

DATE 7-1-19

I, Albert Rodriguez METER TECHNICIAN FOR MACLASKEY OILFIELD SERVICES, INC. HAS CHECKED THE CALIBRATION ON THE FOLLOWING INSTRUMENT. 1000 PRESSURE RECORDER

SERIAL NUMBER

500 71501800

TESTED AT THESE POINTS.

PRESSURE <u>5000</u>		
TEST	AS FOUND	CORRECTED
<u>0</u>	<u>100</u>	<u>/</u>
<u>100</u>	<u>200</u>	<u>/</u>
<u>200</u>	<u>300</u>	<u>/</u>
<u>300</u>	<u>400</u>	<u>/</u>
<u>400</u>	<u>500</u>	<u>/</u>

PRESSURE <u>1000</u>		
TEST	AS FOUND	CORRECT
<u>500</u>	<u>600</u>	<u>/</u>
<u>600</u>	<u>700</u>	<u>/</u>
<u>700</u>	<u>800</u>	<u>/</u>
<u>800</u>	<u>900</u>	<u>/</u>
<u>900</u>	<u>100</u>	<u>/</u>

REMARKS:

SIGNED

Albert Rodriguez

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

HOBBS OCD

JUL 24 2019

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BRADENHEAD TEST REPORT

Operator Name Frontier Field Services		API Number 30-025-42628
Property Name MAZAMPA AGI		Well No. 002

1. Surface Location

UL - Lot 0	Section 21	Township 17-S	Range 32-E	Feet from 400	N/S Line S	Feet From 2100	E/W Line E	County Lea
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Well Status

TA'D WELL YES <input checked="" type="checkbox"/> NO	SHUT-IN YES <input checked="" type="checkbox"/> NO	INJECTOR <input checked="" type="checkbox"/> SWD	PRODUCER OIL GAS	DATE 7-22-19
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	32	0	35	350	2200
Flow Characteristics					
Puff	0/N	Y/0	0/N	0/N	CO2 WTR ____ GAS ____ Type of Fluid Inferred for Weathered if applies
Steady Flow	Y/0	Y/0	Y/0	Y/0	
Surges	Y/0	Y/0	Y/0	Y/0	
Down to nothing	0/N	0/N	0/N	0/N	
Gas or Oil	Y/0	Y/0	Y/0	Y/0	
Water	Y/0	Y/0	Y/0	Y/0	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

AGI MIT/BHT Test
(3R) MacLasky
ser# 500 715 01800
cal 7-1-19

Signature:		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test
E-mail Address:		
Date: 7-22-19	Phone:	
Witness: Kerry Fortner - OCD		

399-3221

INSTRUCTIONS ON BACK OF THIS FORM