Type or print name Aliph Reena E-mail address

For State Use Only Monica Kushling

APPROVED BY:

Conditions of Approval (if any):

| Submit 1 Copy To Appropriate District Office <u>District 1</u> – (575) 393-6161   | State of New Me<br>Energy, Minerals and Natu                               | <del>-</del>  | Form C-103<br>Revised July 18, 2013  |  |  |
|---|--|---|--|--|--|
| 1625 N. French Dr., Hobbs, NM 88240<br><u>District II</u> – (575) 748-1283<br>811 S. First St., Artesia, NM 88210   | OIL CONSERVATION DIVISION  |   | WELL API NO. 30-045-28522 5. Indicate Type of Lease  |  |  |
| <u>District III</u> – (505) 334-6178<br>1000 Rio Brazos Rd., Aztec, NM 87410  | 1220 South St. Fran  |   | STATE STATE  |  |  |
| <u>District IV</u> – (505) 476-3460<br>1220 S. St. Francis Dr., Santa Fe, NM<br>87505   | Santa Fe, NM 87  | /505  | 6. State Oil & Gas Lease No.<br>LG-9801  |  |  |
| 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 |  |   | 7. Lease Name or Unit Agreement Name   |  |  |
| PROPOSALS.)  1. Type of Well: Oil Well  | Luna  8. Well Number 2   |   |  |  |  |
| 2. Name of Operator Dugan Production Corp.  |  |   | 9. OGRID Number<br>006515  |  |  |
| 3. Address of Operator PO Box 420, Farmington, NM 87499-0420  |  |   | 10. Pool name or Wildcat Bisti Gallup, South   |  |  |
| 4. Well Location  |  |   | Distriction of the control of the co |  |  |
| Unit Letter A   | : 790 feet from the North  | line and79  |  |  |  |
| Section 16  |  | lange 9W  | NMPM San Juan County   |  |  |
|   | 11. Elevation (Show whether DR, 6698)                                      | ,   |  |  |  |
|   | appropriate Box to Indicate Na   | ture of Notice, R   | eport or Other Data  |  |  |
| NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK □ PLUG AND ABANDON □ REMEDIAL WORK □ ALTERING CASING   |  |   |  |  |  |
| TEMPORARILY ABANDON   | CHANGE PLANS   |   |  |  |  |
| PULL OR ALTER CASING  | MULTIPLE COMPL   | JOB 🗆   |  |  |  |
| DOWNHOLE COMMINGLE  CLOSED-LOOP SYSTEM  |  |   |  |  |  |
| OTHER:  |  |   | eeze   |  |  |
| of starting any proposed wo   | eted operations. (Clearly state all perk) SEE RULE 19 15 7 14 NMAC         | ertinent details, and properties of the company of | give pertinent dates, including estimated date pletions: Attach wellbore diagram of  |  |  |
| proposed completion or reco   | ompletion.   | To Munipie Com  | Sections. Attach wendore diagram of  |  |  |
| The well was squeezed and pressure tester  1) Isolated casing damage from 3   | ed per the following procedure:  | lug Casing bled off 3   | 00 psi for 5 mins & 400 psi for 10 mins with no  |  |  |
| rate.   | or 3550 using 172 pucker & ortuge p  | rug. Casing bled on 5   | oo psi for 3 mins & 400 psi for 10 mins with no  |  |  |
| <ul><li>2) Set BP @ 3662'.</li><li>3) Spot 24 sks (27.6 cu ft), 308' o</li></ul>  | f cement w/2-3/8" J-55 tubing from EOT                                     | @ 3568' to 3260'.   |  |  |  |
| <ol> <li>Pulled out of cement. Set packet</li> </ol>  | er @ 2415' w/EOT @ 3045'.  | NTO:  | 1 . 1000 . 101   |  |  |
| bbl cement. Leave 1000 psi on   | wellhead and shut down for 48 hrs and \                                    | VOC.  | pressured up to 1000 psi. No rate. Squeezed 0.5  |  |  |
| <ul><li>6) Cannot unseat packer. Cut tubi</li><li>7) TIH and tagged TOC @ 3290'.</li></ul>  | ng 7' above packer set depth @ 2408'. F<br>Drill cement out. Notified OCD. | ished packer and tail p   | sipe out of the hole.  |  |  |
| <ol><li>Pressure tested casing to 500 p.</li></ol>  | si for 30 minutes with Wilson Testing. H                                   | eld good. Submitted c   | hart to OCD. Test passed. Please see pressure  |  |  |
| chart attached.  9) RIH and retrieve BP.  |  |   |  |  |  |
| 10) Run tubing and rods in the hole   | . Put well back on production w/EOT 2-                                     | 3/8" J-55 tubing @ 47   | '25', SN @ 4681'.  |  |  |
|   |  |   |  |  |  |
| Could Date:   | ni ni ni   |   |  |  |  |
| Spud Date:  | Rig Release Date   | <del>-</del>  |  |  |  |
|   |  |   | 8  |  |  |
| I hereby certify that the information a   | bove is true and complete to the bes                                       | t of my knowledge a   | and belief.  |  |  |
| SIGNATURE John M.   | Field TITLE Enginee  | ring Supervisor   | DATE 1/28/2021   |  |  |

E-mail address: \_aliph.reena@duganproduction.com

TITLE

Deputy Oil and Gas Inspector

PHONE: \_\_505-360-9192

DATE

5/17/2021

Received by OCD: 1/28/2021 8:51:56 AM

<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720

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 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** 

CONDITIONS

Action 15977

## **CONDITIONS OF APPROVAL**

| Operator:             |                    |                     | OGRID: | Action Number: | Action Type: |
|-----------------------|--------------------|---------------------|--------|----------------|--------------|
| DUGAN PRODUCTION CORP | 709 E Murray Drive | Farmington, NM87499 | 6515   | 15977          | C-103R       |

| OCD Reviewer | Condition   |
|--------------|---|
| ahvermersch  | For all sundry's filed please include dates work was commenced and completed. |