| Submit I Copy To Appropriate District   | State of New Mexico                    |                           | Form C-103                          |  |
|---|--|---------------------------|-------------------------------------|--|
| Office <u>District I</u> ~ (575) 393-6161   | Energy, Minerals and Natural Resources |                           | Revised August 1, 2011              |  |
| 1625 N. French Dr., Hobbs, NM 88240   |  |                           | API NO.                             |  |
| <u>District II</u> – (575) 748-1283<br>811 S. First St., Artesia, NM 88210  | OIL CONSERVATION DIVISION              |                           | 5205                                |  |
| <u>District III</u> – (505) 334-6178  | 1220 South St. Francis Dr.             |                           | ate Type of Lease  TATE FEE         |  |
| 1000 Rio Brazos Rd., Aztec, NM 87410  | Santa Fe, NM 87505                     |                           | Oil & Gas Lease No.                 |  |
| <u>District IV</u> – (505) 476-3460<br>1220 S. St. Francis Dr., Santa Fe, NM<br>87505   | Santa 1 0, 1111 07                     | 0. State                  | Oli & Gas Lease No.                 |  |
| SUNDRY NOTICES AND REPORTS ON WELLS   |  |                           | e 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 PROPOSALS.)   |  |                           | Sand Unit                           |  |
| 1. Type of Well: Oil Well X Gas Well Other  |  |                           | Number #03                          |  |
| 2. Name of Operator   |  |                           | ID Number                           |  |
| Dominion Production Company LLC.  |  | 291567                    |                                     |  |
| 3. Address of Operator  |  |                           | I name or Wildcat                   |  |
| 1414 W. Swann Av. Suite 100, Tampa Florida. 33606   |  | Hospah                    |                                     |  |
| 4. Well Location  |  |                           |                                     |  |
| Unit Letter N: 330' feet from the South line and 1650' feet from the West line  |  |                           |                                     |  |
| Section 36 Township 18N Range 9W NMPM McKinley County   |  |                           |                                     |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)  |  |                           |                                     |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |  |                           |                                     |  |
|   |  |                           |                                     |  |
|   |  |                           | NT REPORT OF:                       |  |
| PERFORM REMEDIAL WORK   | <del>-</del>                           |                           | ☐ ALTERING CASING ☐                 |  |
| TEMPORARILY ABANDON   |  |                           | NS. PANDA                           |  |
| PULL OR ALTER CASING  | <del></del>                            |                           | Ш                                   |  |
| DOWNHOLE COMMINGLE  | !                                      |                           |                                     |  |
| OTHER:  |  | OTHER: Well on Production |                                     |  |
| 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. |  |                           |                                     |  |
| proposed completion of recompletion.  |  |                           |                                     |  |
| The Hospah Sand Unit #03 was returned to production on November 4th, 2012.  |  |                           |                                     |  |
|   |  |                           |                                     |  |
|   |  |                           | RCVD JAN 23 13                      |  |
|   |  |                           | OIL CONS. DIV.                      |  |
|   |  |                           |                                     |  |
|   |  |                           | DIST. 3                             |  |
|   |  |                           |                                     |  |
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|   |  |                           |                                     |  |
| g 15.4  | p: p l                                 |                           |                                     |  |
| Spud Date:  | Rig Release Da                         | te:                       |                                     |  |
|   |  | <u> </u>                  |                                     |  |
|   |  |                           |                                     |  |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.  |  |                           |                                     |  |
|   |  |                           |                                     |  |
| SIGNATURE Miles Allen   | TITLE A                                | gent                      | DATE <u>12-18-2012</u>              |  |
| <u> </u>  |  |                           |                                     |  |
| Type or print name <u>Mike Allen</u>  | E-mail addr                            | ess: mike.allen@nogtx.com | PHONE <u>: <b>(918)260-7620</b></u> |  |
| For State Use Only  |  |                           |                                     |  |
| APPROVED BY:  | FOR RECORD TITLE                       |                           | DATE JAN 2 3 2013                   |  |
| Conditions of Approval (if any):  | IIILE                                  | 1                         | DAIL                                |  |
|   | 1 1                                    | A.                        |                                     |  |