

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

Form C-103
 Revised July 18, 2013

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

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 <input type="checkbox"/>		WELL API NO. 30-043-21292
2. Name of Operator DJR OPERATING, LLC		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 1 ROAD 3263, AZTEC, NM 87410		6. State Oil & Gas Lease No. NMNM109385
4. Well Location: Unit Letter: A : 263 feet from the NORTH line and 1130 feet from the EAST line Section: 11 Township: 22N Range: 6W NMPM SANDOVAL County		7. Lease Name or Unit Agreement Name VENADO CANYON UNIT
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6962' GL		8. Well Number 206H
9. OGRID Number 371838		10. Pool name or Wildcat BASIN MANCOS

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

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

DJR OPERATING CONDUCTED STIMULATION ON THE SUBJECT WELL:

START DATE: 9/26/19

DATE INTER-WELL COMMUNICATED: 10/3/19

TYPE: FRACTURE TREATMENT ON STAGE 41 OF 45

PRESSURE: 8500 psi

NITROGEN: 37,481 bpm. SAND: 205,460 lbs. FLUID: 2,371 bbls

OFFSET OPERATOR AFFECTED: ENDURING RESOURCES, LLC

OFFSET WELLS AFFECTED: JICARILLA 100H [30-043-21188] LOGOS 010 [30-043-21158] LOGOS 011 [30-043-21159]

LOGOS 012 [30-043-21160]

OFFSET WELLS PRODUCING FORMATION: GALLUP

STANDARD OPERATING PRESSURE OF OFFSET WELLS AFFECTED: (not provided)

TYPE OF COMMUNICATION: INCREASE PSI & HIGH N2 CONTENT

NMOC

OCT 16 2019

DISTRICT III

Spud Date:

Rig Release Date:

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

SIGNATURE 

TITLE: Regulatory Specialist

DATE: 10/08/2019

Type or print name: Shaw-Marie Ford

E-mail address: sford@djrlc.com

PHONE: 505-632-3476

For State Use Only

ACCEPTED FOR RECORD

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):