

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

WELL API NO.

30-015-25006

5. Indicate Type of Lease

STATE ☐

FEE ☐

6. State Oil & Gas Lease No.

003401

7. Lease Name or Unit Agreement Name

Trigg Federal

8. Well No.

1

9. Pool name or Wildcat

Fenton Delaware NE

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 ☐

GAS

WELL ☐



OTHER

Salt Water Disposal

2. Name of Operator

Dakota Resources, Inc (I)

3. Address of Operator

911 N. Midkiff, Midland, Tx 79701

4. Well Location

Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line

Section 7

Township

21 South Range 28 East

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3,168' RKB

11.

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 ☐

OTHER: Convert to SWD ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

On or about Feb. 17, 2002 we plan to:

1. Perforate additional sands 3,170' to 3,315'
2. Install AD-1 Packer (IPC) and Rice-Duoline 2 7/8" tubing
3. Run MIT test (24 hr. notice to OCD) w/ chart- - 300# for 30 min.
4. Commence disposal operations.

PKR must be within 100' of Top Pub

4
RECEIVED
OCD - ARTESIA

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

SIGNATURE Alan Roberts TITLE Supt. DATE 1-30-02

TYPE OR PRINT NAME Alan Roberts 915/697-3420 TELEPHONE NO.

(This space for State Use)

APPROVED BY [Signature] TITLE ORIGINAL SIGNED BY TIM W. GUN DATE FEB 05 2002

CONDITIONS OF APPROVAL, IF ANY:

DISTRICT II SUPERVISOR