| Submit 3 Copies To Appropriate District Office  | State of New Energy Minerals and     |  | Form C-103<br>March 4, 2004                        |                               |
|---|--------------------------------------|--|--|-------------------------------|
| District I 1625 N. French Dr., Hobbs, NM 88240 Energy, Minerals and Natural Resources   |                                      | THE TABLE OF THE PARTY OF THE P |  |                               |
| District II   |                                      |  | 30-045- 52   | 2000                          |
| 1301 W. Grand Ave., Artesia, NM 88210<br><u>District III</u><br>1000 Rio Brazos Rd., Aztec, NM 87410  | trict III 1220 South St. Francis Dr. |  | 5. Indicate Type STATE                             | of Lease - FEDERAL            |
| District IV<br>1220 S. St. Francis Dr., Santa Fe, NM<br>87505   |                                      |  | 6. State Oil & Gas Lease No.<br>Federal: SF-078091 |                               |
| SUNDRY NOTICES AND REPORTS ON WELCS? 13 1/1/20  |                                      |  | 7. Lease Name (                                    | or Unit Agreement Name        |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPER OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM CHO1) FOR SUCH  |                                      |  | Patriot  |                               |
| 1 Type of Well:   |                                      | 8. Well Number   |  |                               |
|   |                                      |  | 93\$   |                               |
| 2. Name of Operator   | 1                                    | OBT. ON.   | 9. OGRID Num                                       | ber                           |
| Dugan Production Corp.  |                                      | <u> </u>   | 006515   |                               |
| 3. Address of Operator  | 1400 0420                            |  | 10. Pool name o                                    |                               |
| P. O. Box 420, Farmington, NM 87  4. Well Location  | 499-0420                             | 65 85 15 July 1  | Basin Fruitland (                                  | Loai                          |
| 4. Well Location  |                                      |  |  |                               |
| Unit Letter P: 790 feet from the South line and 790 feet from the East line   |                                      |  |  |                               |
| Section 28  | Township 26N                         |  |  | unty San Juan                 |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6263' GR   |                                      |  |  |                               |
| Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)   |                                      |  |  |                               |
| Pit Location: UL P Sect 28 Twp 26N Rng 13W Pit type Lined Reserve Pit Depth to Groundwater >100' Distance from nearest fresh water well 4.5 miles   |                                      |  |  |                               |
| Distance from nearest surface water 25' Below-grade Tank Location UL Sect Twp Rng;  |                                      |  |  |                               |
| feet from theline and   | feet from thelir                     | ne   |  |                               |
|   |                                      |  |  |                               |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |                                      |  |  |                               |
| NOTICE OF IN  |                                      |  | SEQUENT RE   |                               |
| PERFORM REMEDIAL WORK   |                                      |  |  | ALTERING CASING []            |
| TEMPORARILY ABANDON   |                                      |  | LLING OPNS.  | PLUG AND                      |
| PULL OR ALTER CASING  | MULTIPLE [                           | CASING TEST A  | ND []  | ABANDONMENT                   |
| FOLL OR ALTER CASING [  | COMPLETION                           | CEMENT JOB   | ND 🗆   |                               |
| OTHER: Supplement to APD Fo   | r Rule 50 Compliance                 | ☑ OTHER:   |  |                               |
| 13. Describe proposed or compl  | eted operations. (Clearly sta        | ate all pertinent details, an  | d give pertinent da                                | tes, including estimated date |
| of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion   |                                      |  |  |                               |
| or recompletion.  |                                      |  |  |                               |
| Sundry dated 7/21/04 provided supplemental APD information for NMOCD Rule 50 compliance. The distance to nearest surface water is being revised to reflect an ephemeral drainage not initially considered.  |                                      |  |  |                               |
| being revised to reflect an ephemeral   | manage not minary consic             | ierea.   |  |                               |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or or an (attached) alternative OCD-approved plan.  |                                      |  |  |                               |
| SIGNATURE John O Roc TITLE Engineering Manager DATE November 12, 2004   |                                      |  |  |                               |
| Type or print name  John D. Roe   |                                      |  |  |                               |
| (This space for State use)  NOV 1.5 2004  |                                      |  |  |                               |
| APPROVED BY 11 Se a 1/2 - 1/2 |                                      |  |  |                               |
| APPPROVED BY TITLE TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 20 DATE DATE   |                                      |  |  |                               |
|   |                                      |  |  |                               |