

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

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

Form C-103
Revised August 1, 2011

WELL API NO.

30-031-20407

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

Federal

7. Lease Name or Unit Agreement Name

South Hospah

8. Well Number 54

9. OGRID Number

291567

10. Pool name or Wildcat

Hospah

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 **OIL CONS. DIV DIST. 3**

2. Name of Operator

Dominion Production Company LLC.

NOV 03 2014

3. Address of Operator

1414 W. Swan Av. Suite 100, Tampa Florida. 33606

4. Well Location

Unit Letter **A** : 1319 feet from the North line and 5 feet from the East line

Section **12** Township **17N** Range **9W** NMPM **McKinley** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

6940' GR

12. 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 ☐ MULTIPLE COMPL ☐

DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ P AND A ☐

CASING/CEMENT JOB ☐

OTHER: ☐

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.

Dominion Production has installed required sign at the well location

Please see Attached Picture.

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 **President**

DATE **October 30, 2014**

Type or print name **David Burns**

E-mail address: **burnsdavid@verizon.net**

PHONE: **832-545-4600** 8

For State Use Only

DEPUTY OIL & GAS INSPECTOR

APPROVED BY: 

TITLE _____ DISTRICT **#3**

DATE **11/7/14**

AV

**DOMINION PRODUCTION
COMPANY, LLC**
SOUTH HOSPAH FIELD
SOUTH HOSPAH UNIT #54
1319' FNL & 5' FEL
ULSTR A-12-17N-9W
API # 30-031-20407
MCKINLEY COUNTY, NEW MEXICO
EMERGENCY NO: (1) 832-545-4600

