Submit 3 Copies To Appropriate District Office	State of	State of New Mexico			Form C-103
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources				May 27, 2004
District II				WELL API NO.	
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION			5. Indicate Type of	30-025-09631
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.			STATE	FEE 🔼
District IV	Santa Fe, NM 87505			6. State Oil & Ga	s Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505				14150	
SUNDRY NOT	TICES AND REPORTS O	N WELLS	5	7. Lease Name or	Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPL	DSALS TO DRILL OR TO DEF ICATION FOR PERMIT" (FOR	EPEN OR PL	UG BACK TO A		
PROPOSALS.)				Cooper Ja	
1. Type of Well: Oil Well	Gas Well Other	X Inj	ector DHC	8. Well Number	120 w
2. Name of Operator	SDC Pagaurage I D			9. OGRID Number	er 193003
3. Address of Operator	SDG Resources L. P. P. O. Box 1390			10 5 1	
регист	Montrose, CO 81402			10. Pool name or	
				Tansill, Yates & 7	-Kivers.
4. Well Location		<del></del>		<u> </u>	
Unit Letter C	:660feet from the	NORTH	I line and	1000	1
Section 24	Township			<del></del>	heWESTline
	11. Elevation (Show w		Range 36E	NMPM	LEA County
		3,326' K	, KK <i>D,</i> K1, GK, eic.) (B		医性唇管性 直接
Pit or Below-grade Tank Application	or Closure				
Pit type_DIRTDepth to Groundwater_	Distance from nea	rest fresh w	ater well >1000 feet I	Distance from nearest si	irface water >1000 foot
Pit Liner Thickness: mil	Below-Grade Tank: Volun	ne 200		on MaterialSynthetic	
12. Check	Appropriate Box to Ir	ndicate N			
		idicale iv	ature of Notice,	Report or Other I	Jata
NOTICE OF IN	NTENTION TO:		SUB	SEQUENT REF	PORT OF:
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WOR			K 🔲 .	ALTERING CASING	
PULL OR ALTER CASING			COMMENCE DRI		P AND A
, ott on Attendants	WOLTPLE COMPL		CASING/CEMENT	JOB 🗆	
OTHER: Clean out injector w/Coile	ed Tubing and Acidize.	×	OTHER:		
<ol><li>Describe proposed or com</li></ol>	pleted operations. (Clearly	v state all i	pertinent details and	give pertinent dates	including estimated date
or searcing any proposed wi	ork). SEE RULE 1103. F	For Multip	le Completions: Att	ach wellbore diagrar	n of proposed completion
or recompletion.					
Objective: Clean out injector w	//Coiled Tubing and Acidi	ize with 4 (	000 gallong 150/ NE	SEE HOLASIA	
	and ruoning and ricidi	120 Willi 4,	ooo ganons 13% NE	OFE HCI acid.	7897
1. MIRU Coiled Tubing Unit.				W. W.	25.
2. RIH 1 ¼" Perf-Clean Tool on 1	1 1/4" coil tubing to 2,938'.	•		/2	
3. Energize Tool and clean out Pe	erfs 3,011'-3,416' with sur	rfactant wa	ter.	//	<i>, M</i> <sub>0</sub> , 5√
<ul><li>4. Acidize Perfs 3,011'-3,516' wi</li><li>5. POOH with coiled tubing and r</li></ul>	th 4,000 gallons 15% NEI	FE HCl ac	id.	34	1677
6. RD Coiled Tubing Unit.	ng down Pert-Clean Tool.	•		\%	400 VED
<ol> <li>Place well on injection at appro</li> </ol>	ovimately 228 hund			18	
8. Maximum permitted injection p	oressure is 600 psia			100	16°/
position p	ressure is ooo psig.			المراجعة الم	-11.00
					30,326,00
I hereby certify that the information	above is true and complet	e to the he	et of my knowledge	and half-C and	
grade tank has been/will be constructed or	closed according to NMOCD	guidelines	S, a general permit	and Deilel. I further of an (attached) alterna	certify that any pit or below-
SIGNATURE DOMINGO CO	170				мис осы-арргочей ріан <u>і</u> .
SIGNATURE ESTIMATOR	we faces	TITLE_S	Senior Petroleum En	gineer	DATE_11/10/04_
Type or print name	V F-mail	address F	)omingo@sd		
For State Use Only	I A C A D-main	audi ess. L	Oomingo@sdgresour	ces.com Telephor	ne No. 432-550-7580
Hand 1	11. 1. 1/2				
APPROVED BY: XOUND Conditions of American	v. wmp	TITLE	) hepresentativi	II/STAFF MANAG	ENTE NOV A DEST
Conditions of Approval (if any):					<del>NOV 2 2</del> 2001

