

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

WELL API NO. 30-025-42207
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. NM 0149956
7. Lease Name or Unit Agreement Name N/A
8. Well Number D2
9. OGRID Number 025575
10. Pool name or Wildcat DEVONIAN EXPL.

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: Acid Gas Injection

2. Name of Operator  
DCP MIDSTREAM LP

3. Address of Operator  
370 17<sup>TH</sup> STREET, SUITE 2500, DENVER, CO 80202

4. Well Location  
 Unit Letter L : 1900 feet from the South line and 950 feet from the West line  
 Section 19 Township 19S Range 32E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3548 ft. Ground Level

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: REVISION TO 10M BOP System <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

DCP Midstream LP respectfully requests a revision to the 10M BOP/BOPE system for the 8-3/4" hole from a:

10M BOP system with a 3 Choke manifold system to a:

5M BOP system with a 2 Choke manifold system.

Please see attached for schematics of the 5M BOP and Choke manifold equipment system. The MASP will be approximately 4,840 psi with a half evacuated hole at the anticipated mud weights. It was agreed that the 5M BOP and Choke system will be sufficient for the entire 8-3/4" hole.

*ACCEPTED FOR RECORD  
 PENDING APPROVAL BY BLM*

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 CONSULTANT TO DCP MIDSTREAM LP DATE 09/28/16

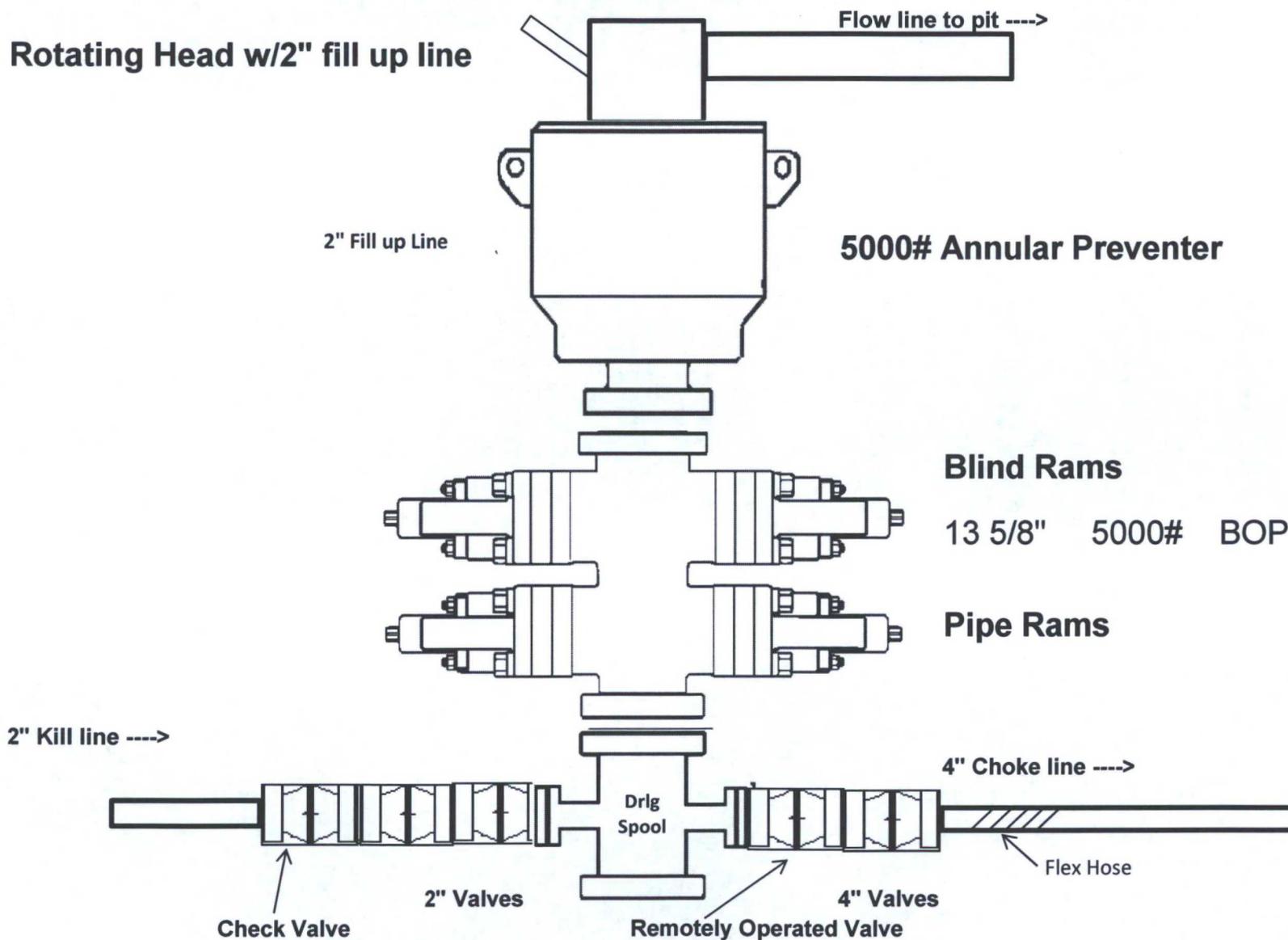
Type or print name JARED R. SMITH E-mail address: JSMITH@GEOLEX.COM PHONE: 505-842-8000

**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

# 5,000 psi BOP Schematic



# 5M Choke Manifold Equipment (WITH MGS + CLOSED LOOP)

