

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.	30-025-38576
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	V07530-0001
7. Lease Name or Unit Agreement Name	Linam AGI
8. Well Number #1	
9. OGRID Number	36785
10. Pool name or Wildcat AGI	Wolfcamp
11. Elevation (Show whether DR, RKB, RT, GR, etc.):	3736 GR

**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 K : 1980 feet from the South line and 1980 feet from the West line  
 Section 30 Township 18S Range 37E NMPM County Lea

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: <input type="checkbox"/>		OTHER: (Mechanical Integrity Test) <input checked="" 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.

The MIT was conducted on Tuesday, February 4, 2020 at 10:00 am (MT). Kerry Fortner (NMOCD) was on site to witness and approve the test, and conduct a Bradenhead Test. Below is a step-by-step summary and results:

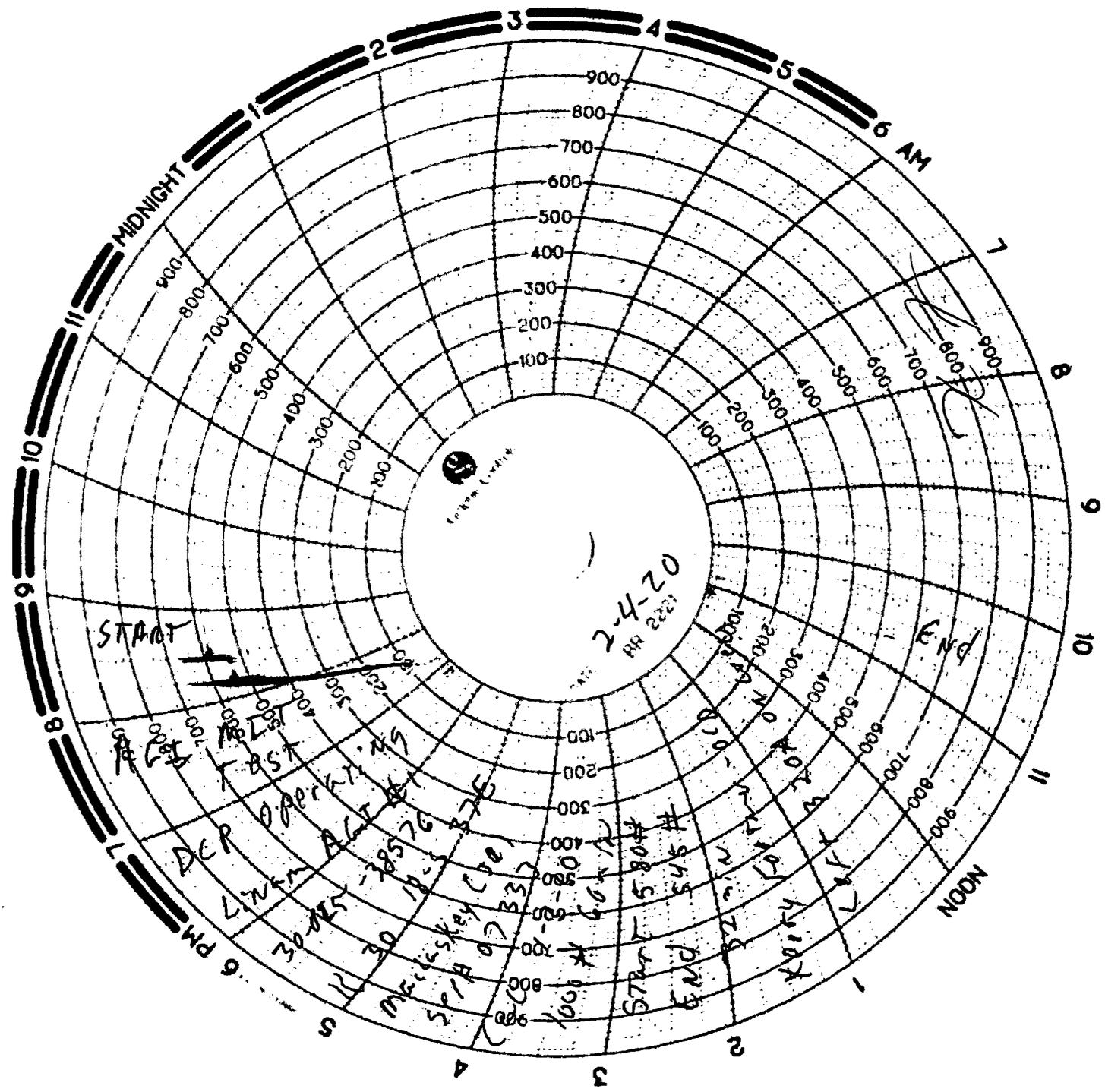
- The annular space pressure between the production casing and tubing was 16 psi at the casing valve sensor prior to the start of the MIT; TAG was being not being injected, and the tubing pressure was 1,109 psi.
- The annular space pressure valve remained closed to the well while attaching a line from the diesel pump truck, with a separate line from the well valve to a chart recorder (calibrated on 1/2/20).
- At 10:13 am diesel from the pump truck was added while opening the valve to the well.
- At 10:15 am the annular pressure reached 580 psi, and chart recorder and well were isolated from the pump truck.
- The MIT began at 10:16 am and the chart recorded the annular pressure until 10:48 am (32 minutes).
- The annular pressure dropped from 580 to 545 psi; a loss of 35 psi (6.0% decrease) by the end of the test.
- Diesel was then bled from the well annulus to the truck. At 302 psi (operation pressure) the valve to the well was shut and the remaining pressure was bled to the truck prior to disconnection of the line and chart recorder.

In addition to the MIT, a Bradenhead test was conducted by the NMOCD by monitoring the intermediate and surface casing annular space pressures. Please see the attached MIT pressure chart (approved by NMOCD), calibration sheet, well bore diagram, and Bradenhead test documentation.

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

SIGNATURE Dale T Littlejohn TITLE Consultant to DCP Midstream DATE 2/5/2020  
 Type or print name Dale T Littlejohn E-mail address: dale@geolex.com PHONE: (505) 842-8000  
**For State Use Only**

APPROVED BY: Kerry Fortner TITLE CO DATE 2-10-20  
 Conditions of Approval (if any):



# MACCLASKEY OILFIELD SERVICES

NATIONAL INSTRUMENT COMPANY, INC. HOUSTON, TEXAS 77240  
505-304-1016

THIS IS TO CERTIFY THAT

DATE 1-2-20

I, Allen Roddy certified TECHNICIAN OF MACCLASKEY OILFIELD SERVICES, INC. HAS CHECKED THE CALIBRATION OF THE FOLLOWING INSTRUMENT: 1000 PRESSURE RECORDER

SERIAL NUMBER  
07333

TESTED AT THESE POINTS.

PRESSURE <u>500</u>			PRESSURE <u>1000</u>		
TEST	AS FOUND	CORRECTED	TEST	AS FOUND	CORRECT
<u>0</u>	<u>100</u>	<u>✓</u>	_____	_____	<u>✓</u>
<u>100</u>	<u>200</u>	<u>✓</u>	_____	_____	<u>✓</u>
<u>200</u>	<u>300</u>	<u>✓</u>	_____	_____	<u>✓</u>
<u>300</u>	<u>400</u>	<u>✓</u>	_____	_____	<u>✓</u>
<u>400</u>	<u>500</u>	<u>✓</u>	_____	_____	<u>✓</u>

REMARKS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SIGNED: Allen Roddy

State of New Mexico  
 Energy, Minerals and Natural Resources Department  
 Oil Conservation Division Hobbs District Office

**BRADENHEAD TEST REPORT**

Operator Name <b>DCP OPERATING COMPANY, LP</b>		API Number <b>30-025-38576</b>
Property Name <b>LINAM AGI</b>		Well No. <b>001</b>

<sup>2</sup> Surface Location

U/L - Lot <b>K</b>	Section <b>30</b>	Township <b>18-S</b>	Range <b>37-E</b>	Feet from 1980	N/S Line <b>S</b>	Feet From 1980	E/W Line <b>W</b>	County <b>LEA</b>
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Well Status

TA'D Well YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	SHUT-IN YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INJECTOR <input checked="" type="checkbox"/> SWD	PRODUCER OIL <input type="checkbox"/> GAS <input type="checkbox"/>	DATE <b>2/4/20</b>
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OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>	<b>68</b>	<b>NA</b>	<b>16</b>	<b>1109</b>
Flow Characteristics					
Puff	<b>Y/N</b>	<b>O/N</b>	<b>Y/N</b>	<b>O/N</b>	CO2 _____
Steady Flow	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	WTR _____
Surges	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	GAS _____
Down to nothing	<b>O/N</b>	<b>O/N</b>	<b>Y/N</b>	<b>O/N</b>	If applicable type
Gas or Oil	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	fluid injected for
Water	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Waterflood

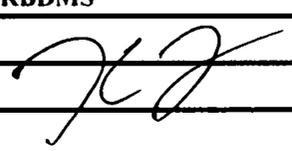
Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

**AGI MIT/BHT TEST**

MacLuskey (JR)  
 Ser# 07333  
 CAL # 1-2-20

S 580#

E 545

Signature:	<b>OIL CONSERVATION DIVISION</b>
Printed name:	Entered into RBDMS
Title:	Re-test 
E-mail Address:	
Date: 2/4/20	Phone:
Witness: <b>Kerry FURTNER - OCD</b>	

575-263-6633

