

Submit 1 Copy To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
October 13, 2009

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

WELL API NO. 30-025-27886
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Richardson Fee
8. Well Number #2
9. OGRID Number 210091
10. Pool name or Wildcat SWD Penn Pool

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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-10) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD <input type="checkbox"/>	
2. Name of Operator D.K.D., L.L.C.	
3. Address of Operator PO Box 682, Tatum, NM 88267	
4. Well Location Unit Letter <u>K : 1980</u> feet from the <u>FS</u> line and <u>1980</u> feet from the <u>FW</u> line Section <u>5</u> Township <u>14S</u> Range <u>36E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3963	

HOBBS OGD  
SEP 11 2020  
RECEIVED

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

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

8/26/20: Rig-up to pull tubing to find leak. Found hole in collar.  
8/28/20: New tubing delivered to location (2-3/8 poly-lined L-80)  
8/31/20: Start putting tubing in hole; shut-down to have Packer machined.  
9/3/20: Packer ready. Start in-hole. Flush casing with 120 bbls FW & packer fluid; set Packer at 10,266.1; load hole; run pre-test MIT test; chart is good.  
9/3/20: Ran certified chart and chart/test was good.  
9/4/20: Hook-up SWD line; start taking water again.

E-MAILED SEP 08 2020

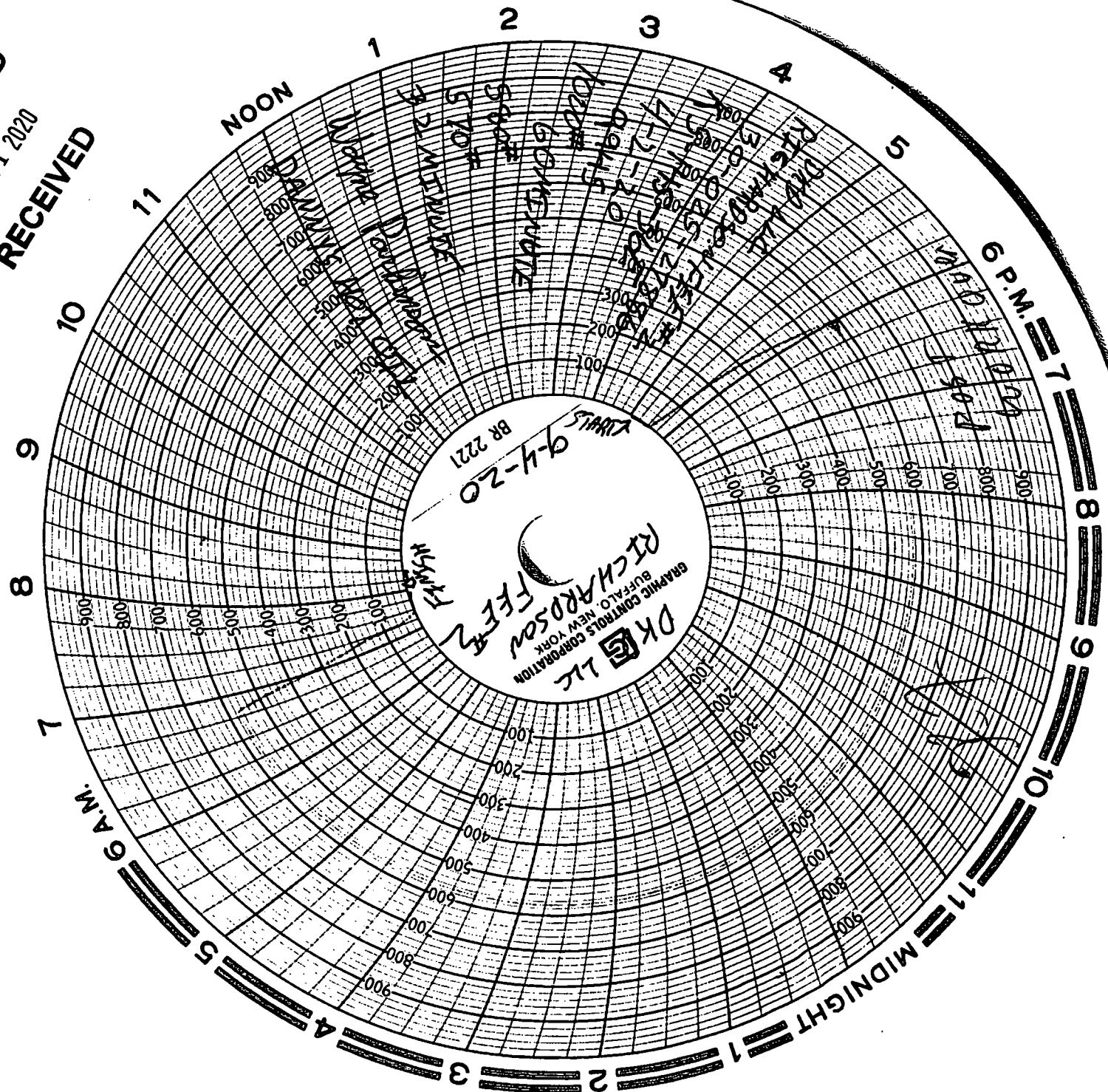
Spud Date:	<input type="text"/>	Rig Release Date:	<input type="text"/>
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Wayne Parkinson TITLE Disposal Manager DATE 09/08/2020  
Type or print name Wayne Parkinson E-mail address: dkddisposals@gmail.com PHONE: (575)398-3490  
**For State Use Only**  
APPROVED BY: Kenny Scott TITLE C O A DATE 9-11-20  
Conditions of Approval (if any):

SEP 11 2020

11 2020  
**RECEIVED**



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9-4-20  
DKD Richardson Fee #2  
30-025-27886  
Calib on 4/2/20  
Serial # 9945

By American Valve & Meter Inc.  
Halden N.H.