

Submit 3 Copies 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
May 27, 2004

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

WELL API NO. 30-025-34197
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No 29221
7. Lease Name or Unit Agreement Name Watson #6-1
8. Well Number 1
9. OGRID Number 210091
10. Pool name or Wildcat Upper Permo Penn

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator DKD, LLC	
3. Address of Operator P. O. Box 682	
4. Well Location Unit Letter <u>N</u> : <u>2857</u> feet from the <u>South</u> line and <u>1417</u> feet from the <u>West</u> line Section <u>6</u> Township <u>16S</u> Range <u>36E</u> NMPM <u>Lea</u> County <u>N. Mex.</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL 3957	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type <u>N/A</u> Depth to Groundwater <u>N/A</u> Distance from nearest fresh water well <u>N/A</u> Distance from nearest surface water <u>N/A</u>	
Pit Liner Thickness: <u>mil</u> Below-Grade Tank: Volume <u>bbls</u> ; Construction Material	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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"/>	
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 1103. For Multiple Completions Attach wellbore diagram of proposed completion or recompletion.

6-21-07 State Mit Test failed.

7-01-07 Rig up pulling unit install BOP then pull tubing and repair or replace as needed.

I hereby certify that the information above is true and complete to the best of my knowledge and belief I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE Pres. DATE 7/1/07

Type or print name
For State Use Only

E-mail address:

Telephone No

APPROVED BY: [Signature]
Conditions of Approval (if any)

OC FIELD REPRESENTATIVE II/STAFF MANAGER
TITLE

JUL 05 2007

DATE