

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy Minerals and Natural Resources Department

3 NMOCD (Hobbs) Form C-103  
1 File Revised 1-1-89  
1 Pennant Pet.

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-005-10524

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

OG-1062

7. Lease Name or Unit Agreement Name

KM Chaveroo SA Unit

8. Well No.

110

9. Pool name or Wildcat

\*Chaveroo (San Andres)

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 ☐

Water  
OTHER Injection Well\*

2. Name of Operator

Dugan Production Corp.

3. Address of Operator

P.O. Box 420, Farmington, NM 87499

4. Well Location

Unit Letter N : 990 Feet From The South Line and 1980 Feet From The West Line

Section 2 Township 8S Range 33E NMMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

4375' RKB

11.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Change status (active) ☒

12. 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.

Request this water injection well change status from temporarily abandoned to active, effective June 1, 2000. ✓  
2007/11/13/101

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

SIGNATURE

*Terry Kochis*

TITLE

Engineer

DATE 9/21/00

TYPE OR PRINT NAME

Terry Kochis

TELEPHONE NO. (505)325-1821

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: