

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 811 South First, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87504

State of New Mexico
 Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
 Santa Fe, NM 87504

Form C-103
 Revised March 25, 1999

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.)		WELL API NO.
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>SALT WATER DISPOSAL</u>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <u>DYNEGY MIDSTREAM SERVICES, LP</u>		6. State Oil & Gas Lease No.
3. Address of Operator <u>P.O. BOX 1689, LOVINGTON, NM 88260</u>		7. Lease Name or Unit Agreement Name: <u>MAUD SAUNDERS</u>
4. Well Location Unit Letter <u>L</u> <u>1815</u> feet from the <u>SOUTH</u> line and <u>660</u> feet from the <u>WEST</u> line Section <u>34</u> Township <u>14 S</u> Range <u>33 E</u> NMPM County		8. Well No. <u>4</u>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>4199' GL</u>		9. Pool name or Wildcat <u>SAUNDERS</u>

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: 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 COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>
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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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

ACIDIZE PERFS 4620-4630', 4645'-5,050' WITH 8,000 GALLONS OF 15% NEFE TYPE ACID. PUMPED 40 Bbls. 2% KCL TO FLUSH.
 MAXIMUM VALUES FOR JOB - TBQ. PRESSURE 2,674# @ 4.58 bpm.
 ANNULUS PRESSURE 566#. ISIP 614#, 5 MIN. - 356#, 10 MIN. - 301#, 15 MIN. 280#. PUT BACK ON PRODUCTION. INJECTION RATE - 20 GALLONS/MIN. @ 480#. BLEED BACK ANNULUS PRESSURE TO 0#.
 ACID JOB PERFORMED ON 5/26/01.

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

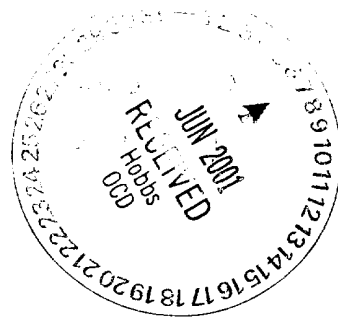
SIGNATURE Mario Corral TITLE _____ DATE 5/29/01

Type or print name MARIO CORRAL
 (This space for State use)

Telephone No. 396-3221 (EXT. 229)

APPROVED BY _____ TITLE _____ DATE _____
 Conditions of approval, if any:

5
 2



District I
PO Box 1980, Hobbs, NM 88241-1980
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-104
Revised October 18, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Dynergy Midstream Services, Limited Partnership 1000 Louisiana, Suite 5800 Houston, Texas 77002		² OGRID Number 24650
⁴ API Number 30 - 025-01195	⁵ Pool Name SWD San Andres	³ Reason for Filing Code CH 7/1/98 ✓
⁷ Property Code 19959	⁶ Pool Code 96121	⁸ Well Number 4
⁹ Property Name Maud Sanders		

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
L	34	14S	33E		1815	South	660	West	Lea

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Lse Code S	¹³ Producing Method Code SWD	¹⁴ Gas Connection Date N/A	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
		2808904	8	

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description

V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforations	³⁰ DHC, DC, MC
³¹ Hole Size		³² Casing & Tubing Size		³³ Depth Set	³⁴ Sacks Cement

VI. Well Test Data

³⁵ Date New Oil	³⁶ Gas Delivery Date	³⁷ Test Date	³⁸ Test Length	³⁹ Tbg. Pressure	⁴⁰ Csg. Pressure
⁴¹ Choke Size	⁴² Oil	⁴³ Water	⁴⁴ Gas	⁴⁵ AOF	⁴⁶ Test Method

I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Sandra Rowan*
Printed name: Sandra Rowan

Title: Administrative Assistant

Date: 8-17-98

Phone: (713) 507-3735

OIL CONSERVATION DIVISION

Approved by: ORIGINAL SIGNED BY
GARY MEIK
FIELD REPRESENTATIVE

Approval Date: SEP 15 1998

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

Lorraine A. [unclear]

etc