|  |   |  | }            |  |                                     |
|--|---|--|--------------|--|-------------------------------------|
| Submit 1 Copy To Appropriate District Office <u>District I</u> – (575) 393-6161  | Energy, Minerals and  |  | urces        | -  | Form C-103<br>Revised July 18, 2013 |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II ~ (575) 748-1283  | )   | (  |              | WELL API NO.                                       | 10 Vised July 10, 2013              |
| 811 S. First St., Artesia, NM 88210<br>District III - (505) 334-6178   | OIL CONSERVA  |  | ION          | 30-015-44530<br>5. Indicate Type o                 | CI                                  |
| 1000 Rio Brazos Rd., Aztec, NM 8741<br>District IV – (505) 476-3460  | 1220 South St   |  |              | STATE  | FEE                                 |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505   | Santa Fe, N   | NIM 87505                                    |              | 6. State Oil & Gas                                 | Lease No.                           |
| SUNDRY N   | OTICES AND REPORTS ON W   | WELLS  |              |  |                                     |
| DIFFERENT RESERVOIR. USE "AP<br>PROPOSALS.)  | OPOSALS TO DRILL OR TO DEEPEN<br>PLICATION FOR PERMIT" (FORM C    | OR PLUG BACK<br>2-101) FOR SUCH              |              | Alpha SWD  | Unit Agreement Name                 |
| 1. Type of Well: Oil Well 2. Name of Operator  | Gas Well Other Swin   | /I OIL CONS<br><del>- Artesia d</del> i      | EKVAII       | 8. Well Number 2                                   |                                     |
| NGL Water Solutions Permia   | n LLC   | •      |              | 9. OGRID Numbe                                     | •                                   |
| 3. Address of Operator   |   | MAR 07                                       | 2019         | 372338<br>10. Pool name or V                       | Vildeat                             |
| 1509 W Wall St, Suite 306, Mi<br>4. Well Location  | dland, TX 79701   |  |              | SWD: Silurian-De                                   | evonian                             |
| Unit Letter C  | 353 Foot Grand Nor  | RECEI  | 1 230        | 8  | 11/                                 |
| Section 18   | feet from the Township 23S  |  | and          | feet from  | the West line                       |
|  | 11. Elevation (Show whether                                       | Range 28E<br>ner DR, RKB, RT                 | GR. etc.)    | NMPM   | County Eddy                         |
|  | 3051 GR   |  | , 010, 010.9 |  |                                     |
| 12 Chec  | k Annronvieta Dan ta ta ita                                       | . 37.  |              | _  |                                     |
|  | k Appropriate Box to Indica                                       | ate Nature of                                | Notice, I    | Report or Other D                                  | )ata                                |
| NOTICE OF  | INTENTION TO:   | Ì  | SUBS         | SEQUENT REP  | ORT OF:                             |
| PERFORM REMEDIAL WORK   TEMPORARILY ABANDON  |   |  | IAL WORK     |  | LTERING CASING                      |
| DULL OF ALTER ALEXA  | ☐ CHANGE PLANS ☐ ☐ MULTIPLE COMPL ☐                               |  |              |  | AND A                               |
| DOWNHOLE COMMINGLE [   |   | CASING                                       | CEMENT       | JOB []   |                                     |
| CLOSED-LOOP SYSTEM (OTHER:   |   |  | 1st int ca   | sing   | 1                                   |
| 13. Describe proposed or con   | mulated operations (Class)  | J OTHER:                                     | <del></del>  |  |                                     |
| NDA on 9/18/18, 9/20/18  | mpleted operations. (Clearly state Drld 17-1/2 to TD @ 2532'. 9/2 | te all pertinent d                           | etails, and  | give pertinent dates,                              | including estimated dat             |
|  | 10 0013 (1730 3831 13.7 DDG HAIC                                  | em tirc 17/16                                | ols back to  | n 01 jts 1 <u>3-3/8 68#</u> )<br>surface CIP @080/ | _80_BTC. Set @ 2515.                |
| Pressure test to 555 psi for   | 30 mins. Held. WOC. NDA or  | n 9/23/18.                                   | 22011 (0     | surribe. CH (6000)                                 | 7 ms 9/21/18. 9/22/18               |
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| Spud Däte: 9/15/18   | Rig Relea   | se Date:                                     |              |  |                                     |
| Spud Däte: 9/15/18   | Rig Releas  | se Date:                                     |              |  |                                     |
| put Date.  |   | <u></u>                                      |              |  | ]<br>/ Den 25                       |
| spud Date.   |   | <u></u>                                      | nowledge     | and belief.  | ]<br>1 AB 21.25                     |
| Spud Date: 9/15/18  I hereby certify that the information  | on above is true and complete to                                  | the best of my k                             |              |  | / AB21251                           |
| hereby certify that the informatio   | on above is true and complete to the                              | <u></u>                                      |              | e  | _                                   |
| hercby certify that the informatio   | on above is true and complete to the TITLE_                       | the best of my k                             | Complianc    | DAT  | E_3.11.19                           |
| hereby certify that the information IGNATURE Sarah Jordan  | on above is true and complete to the                              | the best of my k                             |              | DAT  |                                     |
| hercby certify that the information of the control  | on above is true and complete to the TITLE  E-mail ad             | the best of my k  Manager of Red  sarah.jord | Complianc    | DAT  |                                     |
| hercby certify that the information of the information of the second of the information o | on above is true and complete to the TITLE_                       | the best of my k  Manager of Red  sarah.jord | Complianc    | DAT  | E                                   |
| hereby certify that the information of the information of the second of the information o | on above is true and complete to the TITLE  E-mail ad             | the best of my k  Manager of Red  sarah.jord | Complianc    | DAT  | E                                   |
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| hereby certify that the information of the information of the second of the information o | on above is true and complete to the TITLE  E-mail ad             | the best of my k  Manager of Red  sarah.jord | Complianc    | DAT  | E                                   |
| hereby certify that the information in the informat | on above is true and complete to the TITLE  E-mail ad             | the best of my k  Manager of Red  sarah.jord | Complianc    | DAT  | E                                   |