## **CONDITIONS OF APPROVAL**

API#	Operator	Well name & Number	
30-025-43908	SOLARIS WATER MIDSTREAM	BRININSTOOL SWD # 001	

Applicable conditions of approval marked with XXXXXX

# Administrative Orders Required

XXXXXXXX	Reveiw administrative order SWD-1685 for additional conditions of approvall

#### Other wells

## Drilling

mmediately set in

# Casing

culate to surface
r to seal off protectable water
е

## **Lost Circulation**

XXXXXXX	Must notify OCD Hobbs Office if lost circulation is encountered at 575-370-3186	

## Water flows

XXXXXXX	Must notify OCD Hobbs Office of any water flow in the Salado formation at 575-370-3186. Report depth	
	and flow rate.	

# Stage Tool

XXXXXX	Must notify OCD Hobbs Office prior to running Stage Tool at 575-370-3186
XXXXXXX	If using Stage Tool on Surface casing, Stage Tool must be greater than 350' and a minimum 200 feet
	above surface shoe.
XXXXXX	When using a Stage Tool on Intermediate or Production Casing Stage must be a minimum of 50 feet
	below previous casing shoe.

# Completion & Production

XXXXXXX	Will require a deviational survey with the C-105	
XXXXXXX	Must notify Hobbs OCD office prior to conducting MIT (575) 393-6161 ext. 114	
XXXXXXX	Must conduct & pass MIT prior to any injection	