

State of New Mexico
Energy, Minerals and Natural ResourcesForm C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.

30-025-20637

5. Indicate Type of Lease

STATE ☒FEE ☒

6. State Oil & Gas Lease No.

20713

Lease Name or Unit Agreement Name

FLYING M SA UNIT

8. Well Number

#141

9. OGRID Number

21355

10. Pool name or Wildcat

FLYING M 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 ☐ Other ☒ INJECTION

2. Name of Operator

SOUTHWEST ROYALTIES, INC.

3. Address of Operator

P.O. BOX 53570; MIDLAND, TEXAS 79710-3570

4. Well Location

Unit Letter P : 660 feet from the SOUTH line and 663 feet from the EAST lineSection 20 Township 9S Range 33E NMPM LEA County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

4,336' GR

12. 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 ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐ OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: ☐

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/17-21/19: RU rig. POOH tbg, replaced pkr. Set pkr @ 4,379' (65' above top perf at 4,444'). Circulate pkr fluid. Test csg to 500 psi, held for 32 mins.

Chart approved by NMOCD - George Bower

Spud Date:

JUNE 3, 1964

Rig Release Date:

JUNE 10, 1964

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

SIGNATURE

TITLE REGULATORY ANALYST

DATE 01/22/2019

Type or print name LINDSAY LIVESAY

E-mail address: llivesay@swrpermian.com

PHONE: (432) 207-3054

For State Use Only

APPROVED BY:

TITLE

Compliance Supervisor

DATE

1/24/2019

Conditions of Approval (if any):

ACD Trucking
Cntr. brchs 1-14-2019
Serial # 82669
1000* Sprms



DATE 1-21-2019
BR 2221

MIDNIGHT

6 AM

NOON

6 PM

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