1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 <u>District II</u> 811 S. First St., Artesia, NM 88210

SIGNATURE

Type or print name

For State Use Only: APPROVED BY:

State of New Mexico Energy, Minerals and Natural Resources

Form C-103 Permit 292200

WELL API NUMBER

| | 8-1283 Fax:(57 | 5) 748-9720 | | (| JII Cor | ıserv | ation | DIVIS | ion | | | | 30-015-47 | '690 | |
|--|------------------------------------|---------------------------------|-----------------|------------------|------------------|--------------|-----------------|------------|------------------|--------------|-------------------|--------------|----------------|-------------|-------------|
| District III | D. A | 4.07.440 | | | 4000 | 0 04 | F | .:. D | _ | | | 5. Indicate | Type of Lea | ase | |
| | s Rd., Aztec, NN 4-6178 Fax:(50 | | | | | | | | | S | | | | | |
| District IV | 4-01701 ax.(50 | 3) 334-0170 | | | Son | to Eo | NINA C | 7505 | | | | 6. State O | il & Gas Lea | se No. | |
| | cis Dr., Santa F | e, NM 87505 | | | San | la re | , NM 8 | 7 505 |) | | | | | | |
| Phone:(505) 47 | 6-3470 Fax:(50 | 5) 476-3462 | | | | | | | | | | | | | |
| | | 0111 | DDV/10 | TIOEO ANIE | | | <i>(</i> =o | | | | | 7. Lease N | lame or Unit | - | t Name |
| | | | | TICES AND | | | _ | | | | | | BIG N TAS | TY | |
| | THIS FORM FOI FOR SUCH PRO | R PROPOSALS TO DR | ILL OR TO D | EEPEN OR PL | UG BACK TO A | A DIFFERE | NT RESERV | OIR. USE | "APPLICAT | ION FOR P | ERMIT" | | | | |
| <u> </u> | | PUSALS.) | | | | | | | | | | | | | |
| 1. Type of Well: | : | | | | | | | | | | | 8. Well Nu | | | |
| 0 | | | | | | | | | | | | | 010H | | |
| 2. Name of Ope | | | | | | | | | | | | 9. OGRID | | | |
| | r Energy Partr | ners LLC | | | | | | | | | | | 328947 | | |
| 3. Address of O | | 0 | TV 7700 | | | | | | | | | 10. Pool n | ame or Wild | cat | |
| | | y, Suite 500, Housto | on, 1X //U2 | :4 | | | | | | | | | | | |
| Well Location | | 1100 | | | | | | , | | | | | | | |
| | | 1128 feet from the | | | d feet <u>60</u> | | from the W | | line | | | | | | |
| Sect | ion <u>2</u> | Township 17S | Range | 31E | NMPM | Coul | nty <u>Eddy</u> | | | | | | | | |
| | | 44.5 | 'l | | KD DT OD - | 4- \ | | | | | | | | | |
| | | 11. 6 | 3967 | ow whether DR, | KB, BT, GR, e | etc.) | | | | | | | | | |
| Pit or Below-ars | ade Tank Applic | ation or Closure | 3301 | OI C | | | | | | | | | | | |
| | | | | | 4 | D:-t | 6 | | -4 | | | | | | |
| · - | | oundwater Di | | | | _ | | surrace w | ater | - | | | | | |
| Pit Liner Thickn | ess: | _ mil Below-Gra | de Tank: Voli | ıme | bbls; Co | nstruction I | //aterial | | | | | | | | |
| 12. Check App | ropriate Box to I | ndicate Nature of Notic | e, Report or | Other Data | | | | | | | | | | | |
| | | NOTICE OF IN | | | | _ | | | | SUBSE | QUENT RE | | | | _ |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | | | | | | | | | ALTER CASING | | | | | | |
| | | | | | | | | | PLUG AND ABANDON | | | | | | |
| PULL OR ALTI | ER CASING | | MULT | IPLE COMPL | | | CASING/C | | | | |] | | | |
| Other: Other: Drilling/Cement | | | | | | | | | | | × | | | | |
| | | | | | | | | | | | | | | | |
| 13 Describe pr | onosed or comp | leted operations. (Clea | rly state all r | ertinent details | and give perf | tinent dates | including e | stimated d | ate of starti | ng any prope | nsed work | SEE RULI | F 1103 For I | Multiple Co | mnletions: |
| | | oosed completion or re | | ortinont dotano | , and give poin | anoni dato | , moraamig o | oumatou u | ato or otartii | .g a, p.op. | 5554 W5.K., | 022.102. | | manapio oo | piotiono. |
| | | 2" hole to 750'. 1/28/20 | | | | | | | | | | | 2 yield follow | ed by 255 | sxs class C |
| additives 13.2pp | pg 1.84 yield Fu | II returns throughout jo | b, circ 100 sx | s cmt to surface | e. 2/12/2021 To | est 13-3/8" | csg to 2055# | for 30 mir | nutes, good | test.1/30/20 |)21 Spudde | ed well. | | | |
| | | | | | | | | | | | | | | | |
| Casing and C | Cement Progr | am | | | | | | | | | | | | | |
| Date | String | Fluid | Hole | Csg | Weight | Grade | Est | Dpth | Sacks | Yield | Class | 1" | Pres | Pres | Open |
| | · · | Туре | Size | Size | lb/ft | | TOC | Set | | | | Dpth | Held | Drop | Hole |
| 01/30/21 | Surf | FreshWater | 17.5 | 13.375 | 54.5 | J-55 | 0 | 708 | 560 | 2.32 | С | 0 | 2055 | 0 | N |
| | | | | | | | | | | | | | | | |
| I hereby certi | fy that the inform | nation above is true an | d complete t | n the hest of my | / knowledge a | nd helief I | further certify | that any r | nit or helow | arade tank | has heen/w | ill he const | ructed or clo | sed accord | ling to |
| | | eral permit \square or an (at | | | | | a. alor ooral | , , | 51 DOIOW- | g. ado tarik | DOO!/W | 20 001131 | | 400014 | 9 10 |
| | | | | | | | | | | | | | | | |

Regulatory Director

Petroleum Specialist - A

DATE

DATE

schapman@spurepllc.com Telephone No.

3/1/2021

832-930-8613

3/4/2021 3:29:50 PM

TITLE

TITLE

Electronically Signed

Kurt Simmons

Sarah Chapman E-mail address

<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720

District II

811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District III

1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. **Santa Fe, NM 87505**

Comments

Permit 292200

DRILLING COMMENTS

| Operator: | OGRID: |
|--------------------------|----------------|
| Spur Energy Partners LLC | 328947 |
| 9655 Katy Freeway | Permit Number: |
| Houston, TX 77024 | 292200 |
| | Permit Type: |
| | Drilling |

Comments

| Created By | Comment | Comment Date |
|-------------|--|-----------------|
| abustamante | Test duration period missing from details. No need to add duplicate comments that is already listed in Casing/hole program table. Revise Cement details/test details and re-submit. | 3/1/2021 |
| abustamante | Surface Casing Test details missing in section #13. Please revise and re-submit. | 3/1/2021 |
| schapman01 | I've added WOC time is 8 hours to work information and in the casing tabam I missing something else? | 3/1/2021 |
| | WOC for 8 hours is not describing test casing details. Please read NMAC rule: 19.15.16.10, I,1 regarding casing test duration details. Please revise and resubmit. Call me if need to. | 3/1/2021 |
| | Added casing pressure and time in work description since there isn't a blank in the casing details tab for this. I usually put that information in the next casing string sundry before we test BOP but I'll correct this going forward. Hopefully this correct the issue. | 3/1/2021 |