

Submit 1 Copy To Appropriate District Office
 District I – (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II – (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III – (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV – (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-22055
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. 322733
7. Lease Name or Unit Agreement Name EXXON SWD
8. Well Number #008
9. OGRID Number 373626
10. Pool name or Wildcat SWD; YATES

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 SWD	
2. Name of Operator PERMIAN WATER SOLUTIONS, LLC	
3. Address of Operator PO BOX 2106 MIDLAND, TX 79701	
4. Well Location Unit Letter _____ O _____ : _____ 1268 _____ feet from the _____ SOUTH _____ line and _____ 2032 _____ feet from the _____ EAST _____ line Section 15 Township 21S Range 27E NMPM County EDDY	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3274' GL	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	P AND A ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
DOWNHOLE COMMINGLE ☐			
CLOSED-LOOP SYSTEM ☐			
OTHER: ☐		OTHER: MIT & BRADENHEAD TEST ☒	

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.

4/13/2022: MET WITH DANNY SMOLIK, OCD DISTRICT 2 REPRESENTATIVE TO PERFORM 5 YEAR BRADENHEAD AND MIT TEST. MIT WAS SUCCESSFUL. CHART ATTACHED. BRADENHEAD TEST WILL BE FILED THROUGH FORM UF-BHT.

Spud Date:

Rig Release Date:

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

SIGNATURE Jenni Usher TITLE REGULATORY AGENT DATE 7/6/22

Type or print name JENNI USHER E-mail address: JENNI@PERMIANWS.COM PHONE: 512-820-8772

For State Use Only

APPROVED BY: [Signature] TITLE Staff Manager DATE 7/18/2022

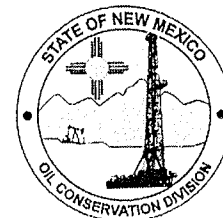
State of New Mexico
Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham
Governor

Sarah Cottrell Propst
Cabinet Secretary

Todd E. Leahy, JD, PhD
Deputy Secretary

Adrienne Sandoval, Division Director
Oil Conservation Division



Date: 4-17-22

API# 30-015-22055

A Mechanical Integrity Test (M.I.T.) was performed on, Well Emon state # 008

☒ M.I.T. is successful, the original chart has been retained by the Operator on site. Submit a legible scan of the chart with an attached **Original C-103Z Form** indicating reason for the test. A scanned image will appear on line via NMOCD website.

☐ M.I.T. is unsuccessful, the original chart is returned to the Operator. Repairs will be made; Operator is to schedule for a re-test within a 90-day period. If this is a test of a repaired well currently in non-compliance, all dates and requirements of the original are still in effect.
No expectation of extension should be construed because of this test.

☐ M.I.T. for Temporary Abandonment, shall include a detailed description on **Form C-103**, including the location of the CIBP and any other tubular goods in the well including the Operator's request for TA status timeline.

☐ M.I.T. is successful, after the secondary request of a scheduled M.I.T. is performed. Therefore, Operator has within a 30-day period from the M.I.T. to submit a current C-103 along with a legible scan of the Chart, including a detailed description of the repair(s). **Only after receipt of the C-103 will the non-compliance be closed.**

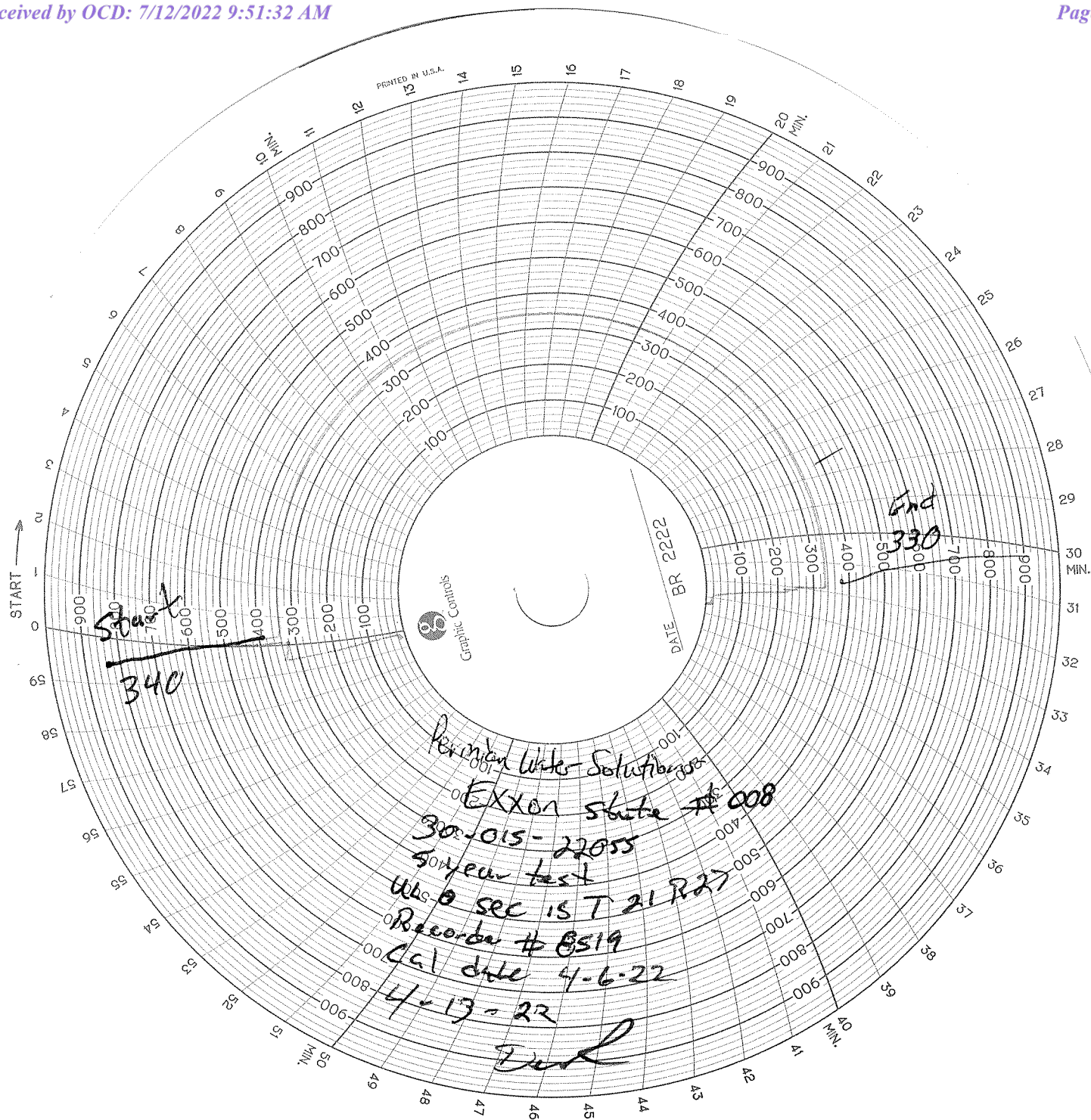
☐ M.I.T. is successful, Initial of an injection well, you must submit a **form C-103** to NMOCD within 30 days. A **C-103 form** must include a detailed description of the work performed on this well including the position of the packer, tubing Information, the date of first Injection, the tubing pressure and Injection volume.

Please ensure all documentation requirements are in place prior to injection process.

If I can be of additional assistance, please feel free to contact me at (575) 626-0836

Thank You,

Dan Smolik
EMNRD-O.C.D.
South District



District I
1625 N. French Dr., Hobbs, NM 88240
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CONDITIONS

Action 124505

CONDITIONS

Operator: Permian Water Solutions, LLC PO Box 2106 Midland, TX 79702	OGRID: 373626
	Action Number: 124505
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	7/18/2022