District I

APPROVED BY:

Sarah K McGrath

## **State of New Mexico**

Form C-103 August 1, 2011

DATE

12/14/2022

1023 N. FIERCH DL., HODDS, NW 002					I		ragaet 1, 201		
Phone:(575) 393-6161 Fax:(575) 39 <b>District II</b>	Enavery Minavala and Natural Decauses					Permit 327238			
1.S. First St. Artesia, NM 88210						WELL API NUMBER			
Phone:(575) 748-1283 Fax:(575) 7	48-9720	Oil Cons	serv	ation Division			5-46746		
District III 1000 Rio Brazos Rd., Aztec, NM 87410  1220 S. St Francis Dr.						5. Indicate Type of Lease F			
Phone:(505) 334-6178 Fax:(505) 334-6170						6. State Oil & Gas Lease No.			
<u>District IV</u> 1220 S. St Francis Dr., Santa Fe, N	M 87505	Santa	a Fe	, NM 87505					
Phone:(505) 476-3470 Fax:(505) 4									
	CLINDDY MOTIC	EC AND DEDODTO	CALVA	/ELLO			r Unit Agreement Name		
(DO NOT USE THIS FORM FOR DE	ROPOSALS TO DRILL OR TO DEEPI	ES AND REPORTS	-		NI EOD DEDMIT"	SALI	CREEK AGI		
(FORM C-101) FOR SUCH PROPO		EN OR FLOG BACK TO A	DIFFERE	NT RESERVOIR. USE AFFEIGATIO	ON FOR FERWIT				
1. Type of Well:						8. Well Number			
S 2. Name of Operator						001	_		
2. Name of Operator Salt Creek Midstrean	n. LLC					9. OGRID Numbe 3735			
3. Address of Operator	· -					10. Pool name or	Wildcat		
	Pkwy W, Suite #150, Houston,	TX 77086							
4. Well Location	20	line and feet EOE		f 41 W					
	62 feet from the Soundship 26S Range	line and feet 595 36E NMPM	Cour	from the <u>W</u>					
<u> </u>	runge <u>200</u> runge	141111111		<u> </u>					
		nether DR, KB, BT, GR, etc	c.)						
	2927 GR								
Pit or Below-grade Tank Applicatio									
	dwater Distance from neares								
Pit Liner Thickness: r	nil Below-Grade Tank: Volume_	bbls; Cons	struction !	Material					
12. Check Appropriate Box to Indic	ate Nature of Notice, Report or Other	r Data							
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK						REPORT OF:  ALTER CASING			
TEMPORARILY ABANDON CHANGE OF PLANS COMMENCE DRILLING OPNS.						PLUG AND A	_		
PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB						]			
Other:				Other: Spud			$\bowtie$		
13. Describe proposed or complete	d operations. (Clearly state all pertin	ent details, and give pertin	nent dates	s, including estimated date of starting	any proposed work.	SEE RULE 1103.	For Multiple Completions:		
Attach wellbore diagram of propose	ed completion or recompletion.			-					
10/18/2022 Spudded well.									
·									
Spudded well @ 4:00 PM CST 10/	18/2022. NMOCD Hobbs field office	notified.							
	on above is true and complete to the permit $\square$ or an (attached) alternative		d belief. I	further certify that any pit or below-gr	ade tank has been/w	ill be constructed	or closed according to		
SIGNATURE	Electronically Signed	TITLE	Re	gulatory manager	DATE		12/13/2022		
Type or print name	Joan Harris	E-mail address	Jo	an.Harris@SCmid.com	Telephoi	ne No.	713-515-6916		
For State Use Only:									

Petroleum Specialist - A

TITLE