Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OH CONCEDIVATION DIVICION	30-025-26307
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505		
	TICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPI	LICATION FOR PERMIT" (FORM C-101) FOR SUCH	Brine Supply Well
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other Brine Well	8. Well Number 001
2. Name of Operator	Gas well Guier Brille Well	9. OGRID Number
Salty Dog Inc.		184208
3. Address of Operator		10. Pool name or Wildcat
P.O. Box 513, Hobbs, NM	88240	
4. Well Location	.1980 feet from the S line and 1	980 F
Oint Detter	icct from the fine and	
Section 5	Township 19S Range 36E 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM County Lea
	3806 GR	c.)
12. Check	Appropriate Box to Indicate Nature of Notice	e, Report or Other Data
		•
		BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK TEMPORARILY ABANDON		RK
PULL OR ALTER CASING	AND THE PROPERTY AND	Land Control C
DOWNHOLE COMMINGLE		_
CLOSED-LOOP SYSTEM		VAC-II C
OTHER:	pleted operations. (Clearly state all pertinent details, a	Well Cavern MIT
of starting any proposed v	vork). SEE RULE 19.15.7.14 NMAC. For Multiple C	ompletions: Attach wellbore diagram of
proposed completion or re	ecompletion.	ompletions. Attach wendore diagram of
PAR Sonices Inc (PAR) h	as coordinated with the New Maying Energy Mine	rale and Natural Bassimass Bassimas of Cil
Conservation Division (OCE	as coordinated with the New Mexico Energy, Mine D) District 1 (Hobbs) Office to conduct a mechanic	al integrity test (MIT) at the Salty Dog brine
well (Brine Supply Well #1 [API No. 30-025-263071). The test will be performed	d on the brine cavern (i.e. Cavern MIT) by
monitoring casing pressure per square inch and records	(not to exceed 500 psi). The casing pressure will led using a calibrated chart recorder. The duration	be set to a targeted pressure of 350 pounds of the MIT will be at least 4 hours. The test
will also comply with all guid	delines provided in the OCD guidance form. There	will not be any changes to the current
configuration of the brine we chart, calibration sheet) to C	ell as a result of the test. After the MIT is complete	e, PAB will submit results (e.g., recorder
chart, calibration sheet) to c	, съ	
Spud Date:	Rig Release Date:	
I hereby certify that the information	n above is true and complete to the best of my knowled	ge and belief.
X		111
SIGNATURE	TITLE Mantse	- DATE \$116/23
		steinenterprise-con
Type or print name Vietu Be	E-mail address: 345	PHONE: 806 7411080
ror State Use Only	-1/	
Type or print name Pieter Be For State Use Only APPROVED BY:	7. Chives TITLE Environmental En	ngineer 5/16/2023
Conditions of Approval (if any):		

OCD UIC Program Draft Brine Well Cavern MIT Guidance (4-

hour hydrostatic well test open to the salt formation)

- The cavern and all piping must be filled, pressured up and stabilized for a period of at least 24 hours prior to testing. If this test requires a packer then casing/tubing annulus must be loaded with inert fluid 24 hours prior to testing.
- 2) Have manpower and equipment available for pressure test. Wellhead shall be prepared for test and all valves and gauges should be in good working order.
- 3) Pumps, tanks, external lines etc. must be isolated from the wellhead during test.
- 4) A continuous recording pressure device with an <u>8 or 12-hour clock</u> shall be installed on the casing/tubing annulus. The pressure range shall not be greater than 500 psig. The operator must provide proof that the pressure-recording device has been calibrated within the past 6 months. Note: Wells with packer installed: If this test requires both the casing/tubing annulus and cavern to be tested then two recording devices must be supplied or one recording device with two pins.
- 5) A minimum of one pressure gauge shall be installed on the casing/tubing annulus.
- 6) OCD must witness the beginning of test (putting chart on) and ending of test (removing chart). Ensure that fluids from the well are not spilled onto the ground.
- 7) The Operator shall supply the following information on the pressure chart:
 - A. Company Name, Well Name, API #, Legal Location.
 - B. Test Procedure (1) Casing + Formation (2) Casing Test Only (3) Both (4) Other
 - C. Testing Media: Water, Gas, Oil, Etc.
 - D. Date, time started and ending.
 - E. Name (printed) and signature of company representative and OCD

Inspector

- 8) <u>TEST ACCEPTANCE:</u> The OCD will use the following criteria in determining if a well has passed the Mechanical Integrity Test:
 - A. <u>Passes</u> if Zero Bleed-Off during the test.
 - B. <u>Passes</u> if Final Test Pressure is within $\pm 1\%$ of Starting Pressure, if approved by the OCD inspector.
 - C. Fails if any Final Test Pressure is greater than \pm 1% of Starting Pressure. Operators must investigate for leaks and demonstrate that mechanical integrity of the well(s) by ensuring there are no leaks in the tubing, casing, or packer, and injected/produced fluids are confined within the piping and injection zones. Wells shall not resume operations until approved by OCD. Caution is urged to reduce pressure appropriately as a function of depth to the salt cavern to prevent fracturing during testing.

Note: OCD recognizes that different operations, well designs, formation characteristics and field conditions may cause variations in the above procedures. If operator wishes to make or anticipate changes please notify the OCD for approval. All operators are responsible to notify OCD of any procedure that may cause harm to the well system or formation. Please be advised that OCD approval does not relieve any operator of liability should operations result in pollution of surface water, groundwater, or the environment.

Also note: This document is intended to provide technical guidance to operators on technical means to achieve compliance with the rules and regulations of the Oil Conservation Division and the Oil and Gas Act. The test procedures set forth are not regulations or policies and therefore other methods may exist to achieve compliance with the rules and regulations and the Oil and Gas Act.

OCD recommends that a licensed professional engineer or licensed geologist, or a licensed professional engineer or licensed geologist designee supervise all test procedures and associated field activity.

District III

District I
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

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

Action 217187

COMMENTS

Operator:	OGRID:
SALTY DOG INC	184208
P.O. Box 513	Action Number:
Hobbs, NM 88240	217187
	Action Type:
	[C-103] NOI General Sundry (C-103X)

COMMENTS

Created By		Comment Date
cchavez	OCD Form C-103X Cavern MIT	5/16/2023

District I
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**

CONDITIONS

Action 217187

CONDITIONS

Operator:	OGRID:
SALTY DOG INC	184208
P.O. Box 513	Action Number:
Hobbs, NM 88240	217187
	Action Type:
	[C-103] NOI General Sundry (C-103X)

CONDITIONS

Created By	Condition	Condition Date
cchavez	1. Starting cavern pressure shall be at least 320 psig but not greater than 350 psig. 2. Within 15-days (Calendar) of test completion, submit OCD Form C-103Z with MIT Chart, Chart Recorder calibration sheet, test info. with signatures. 3. OCD is present to witness the MIT only and not to supervise the MIT. 4. OCD may at its discretion require external measures to ensure the test is isolated and monitoring equipment is functioning properly prior to start of MIT.	5/16/2023