

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

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

Form C-103
 Revised July 18, 2013

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.)		WELL API NO. 30-025-06017
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other SWD		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Rice Operating Company		6. State Oil & Gas Lease No.
3. Address of Operator 112 W Taylor, Hobbs, NM 88240		7. Lease Name or Unit Agreement Name EME SWD
4. Well Location Unit Letter <u>G</u> : 1980 feet from the <u>North</u> line and <u>2310</u> feet from the <u>E</u> line Section <u>8</u> Township <u>20</u> South Range <u>37</u> East NMPM Lea County		8. Well Number <u>008</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3549' GL		9. OGRID Number 19174
		10. Pool name or Wildcat San Andres SWD Interval

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: UIC Testing <input checked="" type="checkbox"/>	

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.

Mit Chart Attached

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

TITLE Foreman

DATE

7/12/2023

Type or print name Israel Juarez

E-mail address: ijuarez@riceswd.com

PHONE: 575-393-9174

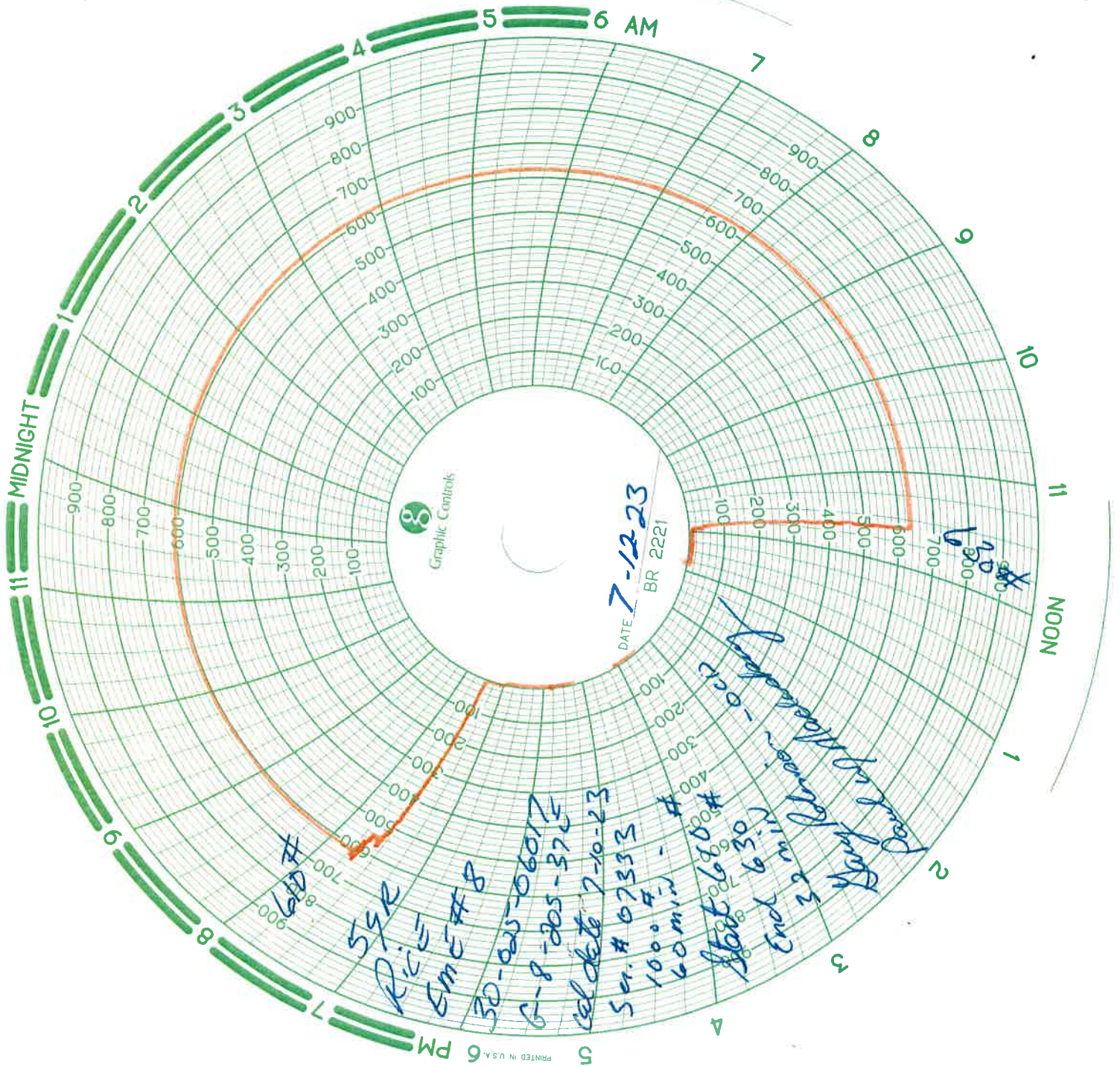
For State Use Only

APPROVED BY:

TITLE Compliance Officer A

DATE 7/18/23

Conditions of Approval (if any):



District I
1625 N French Dr., Hobbs, NM 88240
Phone: (575) 393-6151 Fax: (575) 393-0720

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name Rice Operating Company	API Number 30-025-06017
Property Name EME SWD	Well No. 008

1. Surface Location

UL - Lot G	Section 8	Township 20S	Range 37E	Feet from 1980	N/S Line N	Feet from 2310	E/W Line E	County Lea
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Well Status

TA'D WELL YES	NO	YES	SHUT-IN NO	INJ	S'WD	OIL	PRODUCER GAS	DATE 7-12-23
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	0	0		0	VAC
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR
Surges	Y/N	Y/N	Y/N	Y/N	GAS
Down to nothing	Y/N	Y/N	Y/N	Y/N	Type of fluid Exposed for Waterhead if applies
Gas or Oil	Y/N	Y/N	Y/N	Y/N	
Water	Y/N	Y/N	Y/N	Y/N	

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Prod. csg. has packer fluid Blanket

Signature:	OIL CONSERVATION DIVISION
Printed name: Israel Juarez	Entered into RBDMS
Title: Foreman	Re-test
E-mail Address: ijuarez@riceswd.com	
Date: 7-12-2023	
Phone: 575-393-9174	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

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Santa Fe, NM 87505

CONDITIONS

Action 239610

CONDITIONS

Operator: RICE OPERATING COMPANY 122 W Taylor Hobbs, NM 88240	OGRID: 19174
	Action Number: 239610
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
kfortner	None	7/18/2023