

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. 30-041-00131	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name MILNESAND SAN ANDRES UNIT	
8. Well Number 036	
9. OGRID Number 247520	
10. Pool name or Wildcat CHAVEROO SAN ANDRES	
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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator EOR OPERATING COMPANY	
3. Address of Operator 575 N DAIRY ASHFORD RD, EC II SUITE 210, HOUSTON, TX 77079	
4. Well Location Unit Letter <u>N</u> : <u>660</u> feet from the <u>SOUTH</u> line and <u>1980</u> feet from the <u>WEST</u> line Section <u>18</u> Township <u>08S</u> Range <u>35E</u> NMPM <u>ROOSEVELT</u> County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4241' GL	

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: TUBING REPAIR <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.

MIRU, pull tubing and packer, hydrotest tubing, redress packer run BIH and perform post workover MIT.

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 William Boyd TITLE LAND & REGULATORY MGR DATE 10/10/23

Type or print name WILLIAM BOYD E-mail address: wboyd@pedevco.com PHONE: 713-574-7912

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

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NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: TUBING REPAIR ☒

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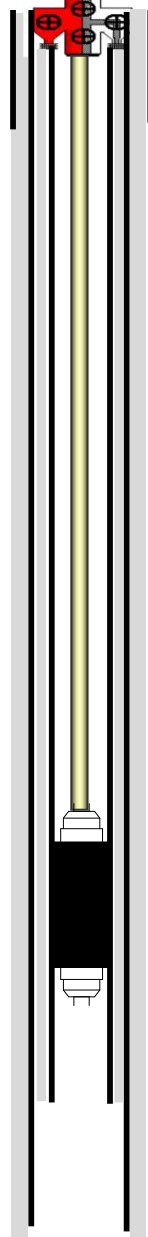
Type or print name WILLIAM BOYD E-mail address: wboyd@pedevco.com PHONE: 713-574-7912

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

VERTICAL COMPLETION

Well Name: MSU 36 INJ							
Well API #: 30-041-00087							
County, State: Roosevelt							
Date: 10/9/2023							
Proposed WBS							
Installation	Surface Casing		Make	Size	Wellhead Detail	OD	ID
	OD:	8-5/8"					
	Weight:						
	Grade:						
	Top:	0	Length	Depth	Tubing Detail (Top Down)	OD	ID
	Bottom:	437			KB		
	Intermediate Csg.						
	OD:	4.5			2-1/16" Tbg		
	Weight:	10.5					
	Grade:	J55			2-7/8" x 2-1/16" AD1 Packer set @ 4428' w/ 8k tension		
	Top:	0					
	Bottom:	4751					
	Production Casing						
	OD:	2-7/8"					
	Weight:	6.5					
	Grade:	J55					
	Top:	0					
	Bottom:	4462.71					
	TOC						
	Surface						
	OD:						
Weight:							
Grade:							
Top:							
Bottom:							
		Count	Feet	Rods Detail			
				N/A			
	Top Perf						
	4528						
	Bottom Perf						
	4678						
			0'				
		Pumping Unit Specs					
		P.U. Make:	N/A				
		P.U. Size:					
		P.U. SL:					
	TD	SPM:					
	4,751	Pump Details					
	PBTD	PUMP SIZE:	N/A				
	4,725	PLUNGER:					
	TVD	STDG VALVE:					
	4,725	STROKE:					

VERTICAL COMPLETION

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CONDITIONS

Action 274017

CONDITIONS

Operator: EOR OPERATING COMPANY 4622 Maple Avenue Dallas, TX 75219	OGRID: 257420
	Action Number: 274017
	Action Type: [C-103] NOI Workover (C-103G)

CONDITIONS

Created By	Condition	Condition Date
mgebremichael	should tubing replacement be required, the same tube size shall be replaced as stipulated by the respective order. The packer shall not be set more than 100 ft above the top perforation.	2/16/2024