Received by QCD; 10/22/2024 12:01:18 PM State of New Mexico Form C Phone: (505) 476-3441 Fax: (55) 476-3462 Revised July 18, 2013 Energy, Minerals and Natural Resources General Information WELL API NO. Phone: (505) 629-6116 30-025-43901 OIL CONSERVATION DIVISION Online Phone Directory Visit: 5. Indicate Type of Lease https://www.emnrd.nm.gov/ocd/contact-us/ 1220 South St. Francis Dr. FEE **STATE** Santa Fe, NM 87505 6. State Oil & Gas Lease No. SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (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 Ryno SWD PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well Gas Well X Other Salt Water Disposal #001 9. OGRID Number 2. Name of Operator GOODNIGHT MIDSTREAM PERMIAN, LLC 372311 3. Address of Operator 10. Pool name or Wildcat 5910 North Central Expressway, Suite 800 Dallas, TX 75206 SWD:SAN ANDRES 4. Well Location . 1450 line and 708 feet from the FNL feet from the FEL Unit Letter H line 17 Section Township 21S Range 36E **NMPM** County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3612' 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 □ COMMENCE DRILLING OPNS. P AND A **TEMPORARILY ABANDON CHANGE PLANS** MULTIPLE COMPL \Box CASING/CEMENT JOB PULL OR ALTER CASING DOWNHOLE COMMINGLE П **CLOSED-LOOP SYSTEM** Perform MIT OTHER: X OTHER: 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. Goodnight requests authorization to perform a mechanical integrity test of the casing-tubing annulus of this well per 19.15.26.11(A) NMAC. The test is tentatively scheduled for 10/23/2024. Goodnight will coordinate the field inspector for witnessing. Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowledge and belief. 10/22/2024 Consultant **SIGNATURE** TITLE DATE PHONE: 918-921-3580 E-mail address: oseekins@all-llc.com Oliver Seekins Type or print name For State Use Only

TITLE

DATE

Conditions of Approval (if any):

APPROVED BY:

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 394627

CONDITIONS

Operator:	OGRID:
GOODNIGHT MIDSTREAM PERMIAN, LLC	372311
5910 North Central Expressway	Action Number:
Dallas, TX 75206	394627
	Action Type:
	[C-103] NOI General Sundry (C-103X)

CONDITIONS

Created By	Condition	Condition Date
kfortner	Notify NMOCD Before testing	10/22/2024