Received by OCD: 1/13/2025 10:46:55 AM State of New Mexico Phone: (505) 476-3441 Energy, Minerals and Natural Resources General Information WELL API NO. Phone: (505) 629-6116 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. STATE FEE 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 Kimberly SWD PROPOSALS.) 8. Well Number 001 1. Type of Well: Oil Well Gas Well Other 9. OGRID Number 388339 2. Name of Operator OWL SWD Operating LLC 3. Address of Operator 10. Pool name or Wildcat 20 Greenway Plaza, Suite 500 Houston, TX 77046 Devonian 4. Well Location . 1450 feet from the EAST feet from the South line and 287 Unit Letter | line Township 25S County I ea **NMPM** Section Range 37E 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3010 GR 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** OTHER: 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. NOI to Perform Remedial Work -Notify NMOCD -MIRÚ WSU -Kill well pull tbg/pkr -Test casing -Provided good csg test replace tbg with like size tbg -Run NMOCD witnessed MIT. Return well to injection post successful MIT WBD will be the same before and after - see 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 Shelly Cowden TITLE Sr. Regulatory Manager DATE 01/13/2025 Type or print name Shelly Cowden Shelly.Cowden@pilotwater.com PHONE: 505-692-0354 E-mail address: For State Use Only

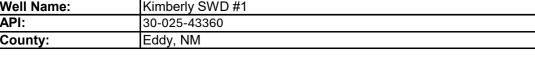
TITLE

DATE

Conditions of Approval (if any):

APPROVED BY:

Well Name:	Kimberly SWD #1
API:	30-025-43360
County:	Eddy, NM



20" Hole

Surface casing @ 1112'

16" 84# HC-N 80 Cement to surface

13-1/2" Hole Intermediate casing @ 4585' 10-3/4" 45.5#HCL-80

Cement to surface

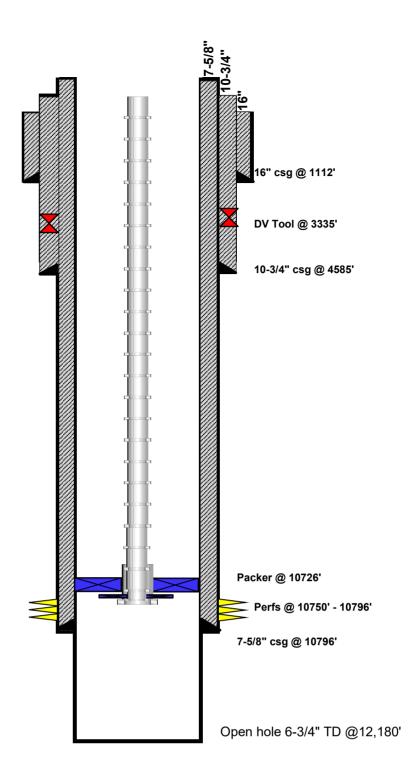
9-7/8" Hole

Production casing @ 10796' 7-5/8" 29.7# HCL-80

Cement to surface

Tubing

5-1/2" 20# HC-L80 EZGO HTGT@ 10726'



Sante Fe Main Office Phone: (505) 476-3441

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

CONDITIONS

Action 419932

CONDITIONS

Operator:	OGRID:
OWL SWD OPERATING, LLC	308339
20 Greenway Plaza	Action Number:
Houston, TX 77046	419932
	Action Type:
	[C-103] NOI Workover (C-103G)

CONDITIONS

Created By		Condition Date
mgebremichael	Ensure the deployment of BOP during the workover. Should the workover require a tube change, ensure that the same-size tube is replaced as prescribed by the respective order. The packer shall not be set more than 100 ft above the injection interval.	4/1/2025