

Santa Fe Main Office
Phone: (505) 476-3441
General Information
Phone: (505) 629-6116

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

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

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

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 Acid Gas Injection Well		WELL API NO. 30-025-43470 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> 6. State Oil & Gas Lease No. NA
2. Name of Operator Targa Midstream Services, LLC		7. Lease Name or Unit Agreement Name Monument AGI D 8. Well Number 002
3. Address of Operator 811 Louisiana Street, Suite 2100, Houston, TX 77002		9. OGRID Number 24650 10. Pool name or Wildcat
4. Well Location Unit Letter O : 685 feet from the South line and 2,362 feet from the East line Section 36 Township 19S Range 36E NMPM County Lea		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,384 (GR)		

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

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

In response to request made by the OCD UIC Engineering Department, Targa will perform the following going forward:

Targa will monitor the Sustained Annular Pressure (SAP) between the 7" and 9-5/8" casing every month for the next six months and report the information to OCD on its Quarterly Report commencing Q2 2025.
 If OCD notices the increase of SAP, it might allow Targa to vent it if it complies with air quality rules of the NMED.
 After six months, Targa will conduct a fluid analysis of the SAP to monitor if there is any compositional change in the fluid.

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 Matt Eales TITLE VP of Regulatory DATE April 28, 2025

Type or print name Matt Eales E-mail address: meales@targaresources.com PHONE: 832-496-7513
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
 Conditions of Approval (if any): _____

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CONDITIONS

Action 456347

CONDITIONS

Operator: Targa Northern Delaware, LLC. 110 W. 7th Street, Suite 2300 Tulsa, OK 74119	OGRID: 331548
	Action Number: 456347
	Action Type: [C-103] NOI General Sundry (C-103X)

CONDITIONS

Created By	Condition	Condition Date
mgebremichael	None	7/25/2025