Received by OCD: 9/2/2025 8:31:04 AM State of New Mexico Phone: (505) 476-3441 Energy, Minerals and Natural Resources General Information WELL API NO. Phone: (505) 629-6116 30-025-42448 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 Madera SWD PROPOSALS.) 8. Well Number 001 1. Type of Well: Oil Well Gas Well Other 2. Name of Operator 9. OGRID Number OWL SWD Operating LLC 308339 3. Address of Operator 10. Pool name or Wildcat 20 Greenway Plaza, Suite 500 Houston, TX 77046 SWD; Devonian (96101) 4. Well Location line and 1970 feet from the SOUTH . 433 feet from the WEST Unit Letter N line Section 11 Township 24S Range 34E County Lea County **NMPM** 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3464' 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 □ P AND A **TEMPORARILY ABANDON** CHANGE PLANS COMMENCE DRILLING OPNS. 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. Notify NMOCD of backside pressure leak and shut in well immediately -Notify NMOCD of rig up date and prior to MOB in -Mové in WSU/Drilling Rig -Kill Well -ND WH NU 10k BOP -Pull 5.5" injection tubing string -PU work string and test tools -Perform casing integrity testing -Notify NMOCD of results and any possible casing or packer leaks found -If new packer needs to be run request NMOCD permission to install 2nd packer on top of old permanent packer -If successful MIT is performed, proceed to TIH w/ new like size 5.5" injection tubing string -Once tubing is run and packer fluid is circulated notify NMOCD of MIT to be witnessed -Run MIT witnessed by NMOCD -Post successful MIT return to injection 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

Type or print name

Shelly Cowden

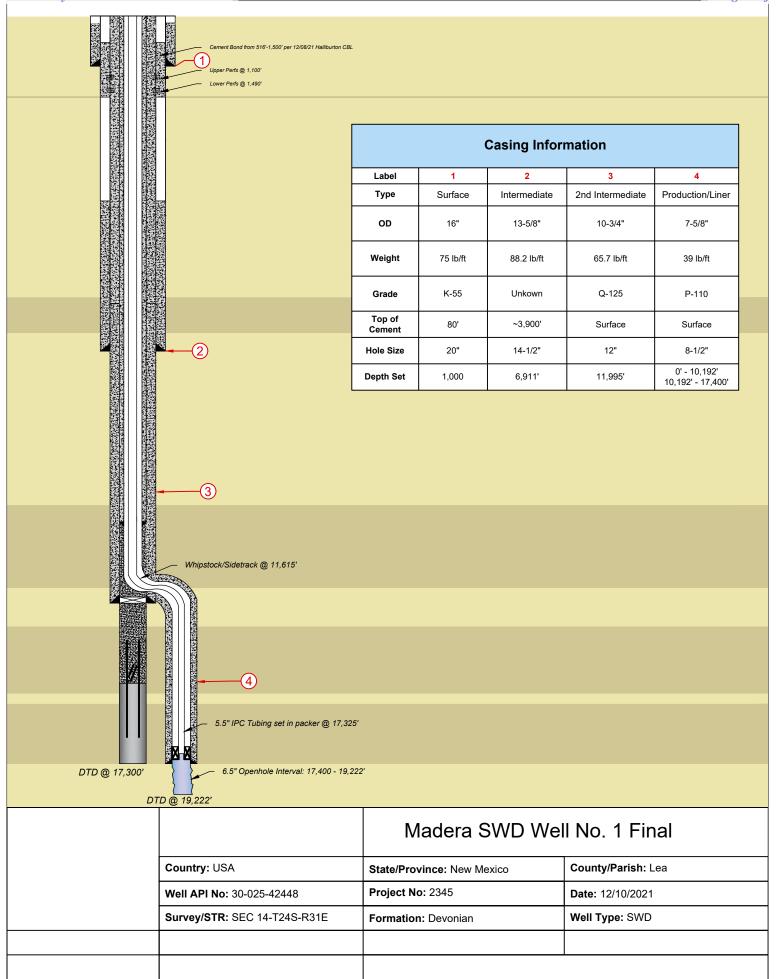
E-mail address:

Shelly.Cowden@pilotwater.com

PHONE: 505-692-0354

TITLE

Conditions of Approval (if any):



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 500949

CONDITIONS

| Operator: | OGRID: |
|------------------------|-------------------------------|
| OWL SWD OPERATING, LLC | 308339 |
| 20 Greenway Plaza | Action Number: |
| Houston, TX 77046 | 500949 |
| | Action Type: |
| | [C-103] NOI Workover (C-103G) |

CONDITIONS

| Created | By Condition | Condition Date |
|---------|---|-------------------|
| pgoet | Operator shall provide a written plan and receive written approval if either casing remediation is required or a second packer is required to be set above the current packer. Operator shall notify Inspection Supervisor 24 hours in advance of MIT for opportunity to have test witnessed. | 9/3/2025 |