Submit 1 Copy To Appropriate District	State of New Mexico		Form C-103	
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II – (575) 748-1283	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		30-025-43908	
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410			STATE FEE X	
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, ININ 87505		6. State Oil & Gas Lease No.	
87505				
	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				
PROPOSALS.)			Solaris Brininstool SWD	
	Type of Well: Oil Well 🔲 Gas Well 🗍 Other SWD		8. Well Number 1	
2. Name of Operator			9. OGRID Number	
Solaris Water Midstream, LLC			371643	
3. Address of Operator			10. Pool name or Wildcat	
207 Tradewinds Blvd, Suite B, Midland, TX 79706		SWD; Devonian		
4. Well Location				
Unit Letter_H:_23	90 feet from the North	line and615_	feet from theEastline	
Section 29	Township 25S	Range 33E	NMPM Lea County	
	11. Elevation (Show whether DR,	, RKB, RT, GR, etc.		
	3390' GR			
	ppropriate Box to Indicate N		•	
			SEQUENT REPORT OF:	
PULL OR ALTER CASING	MULTIPLE COMPL			
CLOSED-LOOP SYSTEM		OTHER: Extend DP X		
	eted operations. (Clearly state all r		d give pertinent dates, including estimated date	
	k). SEE RULE 19.15.7.14 NMAC		mpletions: Attach wellbore diagram of	
Solaris would like to extend the drillin This well is expected to be drilled in t		ol SWD #1 (Proper	ty #318422).	
The current APD is due to expire on T	1/28/19.			
	Al	B EXPIN	259 07/28/20	
	LA:	T BXT	ELG 07/28/20 TENGION	
	APTE	R 7/28/20	MULT SUMMIT NEW A.	
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Spud Date:

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Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Bonnie atuater	TITLE_I	Regulatory Tech	_DATE3/8/19	
Type or print name Bonnie Atwater E-ma <u>For State Use Only</u>	il address: bo	onnie.atwater@solarismietaream.com		
APPROVED BY: Conditions of Approval (if any):	TITLE	Petroleum Engineer		_