

**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  
**District IV**  
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

QUESTIONS  
  
Action 343804

QUESTIONS

|                                                                                |                                            |
|--------------------------------------------------------------------------------|--------------------------------------------|
| Operator:<br>HILCORP ENERGY COMPANY<br>1111 Travis Street<br>Houston, TX 77002 | OGRID:<br>372171                           |
|                                                                                | Action Number:<br>343804                   |
|                                                                                | Action Type:<br>[UF-FAC] UCS-REG (UCS-REG) |

QUESTIONS

|                                                   |                       |
|---------------------------------------------------|-----------------------|
| Facility Details                                  |                       |
| Please answer all of the questions in this group. |                       |
| Name of the facility                              | MASDEN GAS COM 1E CDP |
| Date the facility was opened                      | 03/01/2024            |
| Depth to ground water, if known                   | Not answered.         |

|                                                                |    |
|----------------------------------------------------------------|----|
| Verification                                                   |    |
| Does the operator have other facilities with a matching name   | No |
| Are there other facilites located within approximately 50 feet | No |

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ACKNOWLEDGMENTS  
  
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ACKNOWLEDGMENTS

|                                     |                                                                                               |
|-------------------------------------|-----------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> | I hereby certify that I am authorized to register a facility on behalf of my operator.        |
| <input checked="" type="checkbox"/> | I hereby certify that the OCD will be notified of any changes of ownership for this facility. |
| <input checked="" type="checkbox"/> | I hereby certify that the OCD will be notified when this facility is closed.                  |