Submit within 45 days of well of	bmit within 45 days of well completion State of Now Movice						Revised November 6, 2013			
	State of New Mexico Energy, Minerals and Natural Resources						1. WELL API NO. 30-015-40080			
	Oil Conservation Division 1220 S. St Francis Dr.						2. Well Name: DALE H PARKE B TRACT B #022			
Santa Fe, NM 87505						3. Well Number: 022				
HYDRAULIC FRACTURING FLUID DISCLOSURE						4. Surface Hole Location: Unit:K Lot:K Section:15 Township:17S Range:30E Feet from:1650 N/S Line:S				
⊠ Original						Feet from: 2260   E/W Line: W				
□ Amendment						Feet from:1650 Feet from:2260 6. latitude:	N/ E/	'S Line:S W Line:W ngitude:		
						32.8318443 7. County: Eddy		-103.9610748		
Operator Name and Address:										
PREMIER OIL & ( PO BOX 1246  ARTESIA 88210	GAS INC				9. OGRID:	17985	10. Phon	e Number:		
11. Last Fracture Date: 4/27/2017 Frac Performed by: Elite Well Services 12					12. Production 7 O					
96718					5,00 16. Total Volum	5,004 ft to 6,250 ft /olume of Fluid Pumped: 1,321,656 gals				
						of Re-Use Water in Fluid Pumped: Not Disclosed				
Trade Name	Supplier	Purpose	Ingredients	(CAS#) Che Service#	mical Abstract	Maximum Ingredient Concentration in Addi mass)	tive (% by	Maximum Ingredient Concentration in HF Fluid (% by mass)		
Water	Customer	Carrier/Base Fluid	Water	7732-18-5		1110337	100%	94.33776%		
Sand (Proppant) RCS (Proppant)	US Silica Momentive	Proppant Proppant	Silica Substrate Silica Substrate	14808-60-1			100% 100%	3.56935% 0.72208%		
Hydrochloric Acid (15%)	CNR	Acidizing	Hydrochloric Acid	7647-01-0			38.8%	0.3329%		
4-N-1 Plus	Chemplex	Iron Control,Corr	Acetic Acid	64-19-7			80%	0.00513%		
Discoids OA	Ohamalan	Inhib,Surfactant	Methanol	67-56-1			10%	0.00064%		
Plexcide 24L Plexset 730	Chemplex Chemplex	Biocide Activator	Tetrahydro-3,Dimethyl-2H Secondary Alcohol	533-74-4 84133-50-6			24% 50%	0.00699% 0.00739%		
Dlaveurf 240 F	Ohempley	Curfostant	Ethoxylate	C7 EC 4			400/	0.000000		
Plexsurf 240 E	Chemplex	Surfactant	Methyl Alcohol 2-Butoxyethanol	67-56-1 111-76-2			10% 50%	0.00922% 0.04611%		
Plexslick 953	Chemplex	Friction Reducer	Alcohol Ethoxylate	Proprietary			8%	0.01216%		
		Polymer	Surfactants Hydrotreated Petroleum Distillate	64742-47-8			30%	0.0456%		
Plexgel 907 LE	Chemplex		Polyacrylamide-co-Acrytic Acid Guar Gum	9003-06-9			31% 50%	0.04712%		
r lexger 507 EE	Offernplex	Olymer	Mineral Oil	64742-47-8			55%	0%		
			Bentonite Clay	14808-60-7			2%			
Plexbor 101	Ohamalau	Oznanlinkov	Surfactant	68439-51-0	)		2% 9.99%	0% 0%		
Flexbor 101	Chemplex	Crosslinker	Ethylene Glycol Potssium Metaborate	107-21-1 13709-94-9	9		30%			
	3		Potassium Hydroxide	1310-58-3			5%	0%		
Plexgel Breaker 10L	Chemplex	Gel Breaker	Mannanase Enzymes	Proprietary			2% 15%	0% 0%		
Sodium Persulfate	Chemplex	Gel Breaker	Sodium Chloride Sodium Persulfate	7647-14-5 7775-27-1			98%	0%		
Plexaid TDS	Chemplex	PH Control	Diaminodiethylamine	111-40-0			90%			
Greenhib 679	Chemplex	Scale Inhibitor	Glycerine	56-81-5			35%			
			Proprietary Water	Proprietary 7732-18-5			35% 30%	0.0381% 0.03265%		
Clayplex 650	Chemplex	Clay Stabilizer	Water	7732-18-5			60%	0.06565%		
			Ethanaminium, 2-hydroxy-N,N,N-trimethyl-, chloride	67-48-1			35%	0.0383%		
Plexcide 15G	Chemplex, LC	Biocide	Glutaraldehyde Didecyl dimethyl ammonium chloride	111-30-8 7173-51-5 68424-85-1			14% 3%	0% 0%		
			Alkyl dimethyl benzyl ammonium chloride				3%	0%		
Di	Observation 1	0	Ethanol	64-17-5			3%	0%		
Plexbor 108	Chemplex	Crosslinkrer	Hydrated Aluminmagnesium Silicate Glutaraldehyde	12174-11-7	(		5%	0%		
			Crystalline Slilca	14808-60-7	7		1%	0%		
Buffer 11	Chemplex	PH Control	Potassium Hydroxide	1310-58-3			23%	0%		
20. I. as Operator, hereby certify	that the information sho	own on this disclosure form is	true and complete to the best of m	y knowledge a	nd belief.					

E-mail Address: rosalie@premieroilgas.com

NMOCD does not require the reporting of information beyond MSDS data as described in 29 CFR 1910.1200. NMOCD does not require the reporting or disclosure of proprietary, trade secret or confidential business information.

Buffer 11

Signature:

Date:

Signed Electronically

5/22/2017

20. I, as Operator, hereby certify that the information shown on this disclosure form is true and complete to the best of my knowledge and belief.

Printed Name: Rosalie Jones

Title: President