Santa Fe Main Office Phone: (505) 476-3441 Fax: (55) 476-3462

State of New Mexico Minerals and Natural Resources

	Form	C-103
	Revised July	18, 2013
API NO		

Phone: (505) 629-6116	Energy, witherars and reaction resources	WELL API NO.
Online Phone Directory Visit: https://www.emnrd.nm.gov/ocd/contact-us/	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505	30-025-53152 5. Indicate Type of Lease STATE ☐ FEE ☐ 6. State Oil & Gas Lease No.
		VC0563 & VC0424
(DO NOT USE THIS FORM FOR PROPOSAL) DIFFERENT RESERVOIR. USE "APPLICATION OF THE PROPOSAL OF T	S AND REPORTS ON WELLS S TO DRILL OR TO DEEPEN OR PLUG BACK TO A ION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name Skydweller 14 State Com
PROPOSALS.) 1. Type of Well: Oil Well Gas	s Well Other	8. Well Number 201H
Name of Operator Lario Oil and Gas Company		9. OGRID Number 13089
3. Address of Operator 260 Josephine St, Suite 400, Denver Co	O 80206	10. Pool name or Wildcat Bone Spring
4. Well Location		
Unit Letter E : 2	2425'feet from the _North line and _1	100'feet from the _Westline
Section 23	Township 18S Range 34E	NMPM County Lea
	11. Elevation (Show whether DR, RKB, RT, GR, etc. 1000.7' GR	c.)

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

NOTICE OF	IN	TENTION TO:	SUBSEQUENT REP	ORT OF:		
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK	LTERING CASING [
TEMPORARILY ABANDON		CHANGE PLANS	\boxtimes	COMMENCE DRILLING OPNS. ☐ P	AND A	
PULL OR ALTER CASING		MULTIPLE COMPL		CASING/CEMENT JOB		
DOWNHOLE COMMINGLE						
CLOSED-LOOP SYSTEM						
OTHER:				OTHER:		
13 Describe proposed or co	mnl	eted operations (Clearly	state all r	pertinent details and give pertinent dates	including estimated	dat

of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Lario requests permission to change the First Take Point (FTP) and the Last Take Point (LTP) on the Skydweller 14 State Com 201H. Adjust FTP from 2042' FNL & 1617' FWL, Section 23, T18S R34E to 2542' FNL & 1617' FWL Section 23, T18SR34E. Adjust the LTP from 150' FNL & 1620' FWL Section 14, T18SR34E to 100' FNL & 1620' FWL, Section 14, T18SR34E. Revised C102's showing the new FTP & LTP are attached.

Spud Date: 7/18/20	Rig Release Date:	
I hereby certify that the information	n above is true and complete to the best of my knowled	ge and belief.
SIGNATURE R	TITLE Regulatory Specialist _	DATE 11/12/24
Type or print name _Ryan Bruner_ For State Use Only	E-mail address: <u>ryanb@lario.n</u>	et PHONE: _720-573-9815
APPROVED BY:Conditions of Approval (if any):	TITLE	DATE

Received by OCD: 11/26/2024 10:03:37 AM

ryanb@lario.net

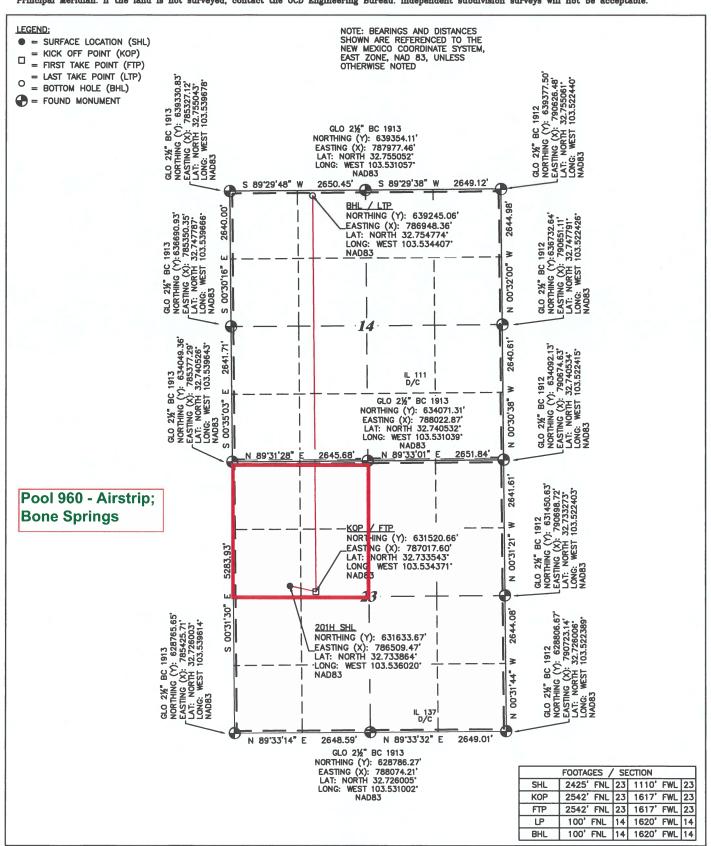
	2			
		ч		
	4			
ς				
		ě		
۴				
	۰	٠		
r				
	`			
۰				
	V	•		
ė	c			
۲	_			
		۹		
9	-	ĸ		
٩	×	۵		
i				
Ţ	٦			
		۹		
٦	`			
١				
ţ				
		٠		
			h	
		ú	0	
		4	0	
	2	4	0	
	2	4	0	
	2	3011	0	
	2	3011	0	
	2	3011	0	
	0112	2011	0	
	0112	2011	0	
	200	311331	0	
	11001	311331	0	
		20112	0	
		20112	0	
	monu	2010 2011	0	
	monu	2010 2011	0	
		2010 2011	0	
	IMOGIN	SHIPPIPE	0	
	IMOGIN	SHIPPIPE	0	
	midduil o	SHIPPING	0	
	midduil o	SHIPPING	0	
	IMOGIN	SHIPPING	0	
	midduil o	SHIPPING	0	
	TO IMPORTA	SHIP SHIP OF	0	
	d to imagin	SHIP SHIP OF	0	
	d to imagin	SHIP SHIP OF	0	
	d to imagin	SHIP SHIP OF	0	
	MIDDIMI OF DO	SHIP SHIP OF	0	
	MIDDIMI OF DO	SHIP SHIP OF	0	
	MIDDIMI OF DOS	SHIP SHIP OF	0	
	MIDDIMI OF DOSE	SHIP SHIP OF	0	
		SHIP SHIP OF	0	
	MIDDINI OI DOSDI	SHIP SHIP OF	0	
	MIDDINI OF DOSDO		0	
	MIDDINI OF DOSDO		0	
	IDUCTOR TO IMPORTA		0	
	MIDDINI OF DOSDO		0	
	IDUCTOR TO IMPORTA		0	
	IDUCTOR TO IMPORTA		0	
	IDUCTOR TO IMPORTA		0	
	IDUCTOR TO IMPORTA		0	
	IDUCTOR TO IMPORTA		0	

<u>C-</u>	-102			En		ate of New & Natural F	Mexico Resources Departme	nt	Revised July 9, 20			
							N DIVISION	-				
Submit Electronically Via OCD Permitting							Submittal					
									Туре:		ended Report	
										As I)rilled	
1000 00				-		ELL LOCATION	N INFORMATION					
	umber 025-53]	152		Pool (Pool Name Airstrip; Bone S	'nvina				
	rty Code	132		_	rty Name		1 Alistrip, Done 3	pring		Well Nu	ımber	
335	618				SKY [DWELLER	14 STATE COM				201H	
OGRID				Opera	tor Name		AC COMPANY				Level Elevation	
Surfa	13069		☐ Fee ☐ Th	Hhal [O OIL & G	Mineral Owner: State	Tee Tr	what Federa		4000.4'	
	OF UMAGE.			TIDOS _	I Gues es	Sumface	Location		ilbar - Fores			
UL	Section	Township	p Range	Lot	Ft. from N/S	Surface Ft. from E/W		1	Longitude		County	
E	23	18 S	34 E		2425' FNL	IIIO' FWL		N 10:	3.536020	1º W	LEA	
			10					1	2.00002	, ,,		
UL	Section	Township	p Range	Lot	Pt. from N/S	Bottom Hol			Longitude		C	
C	14	18 S	34 E	Lot	100' FNL	1620' FW		VI 10:	3.534407	, o w	County LEA	
	14	10 3	J4 L		I 100 I NE	1020 1 11	L 32./34//4	N 100	J. 334407	44	LLA	
Dedica	ted Acres		Infill or Def	fining W	Vell Defining Wel	II API	Overlapping Spacing Uni	t (Y/N)	Consolida	tion Code	В	
16	0		D		30-025-	53152	N		C			
	Numbers.					00102	Well setbacks are under	Common 0		Yes 🔲	No	
						Kick Off P	Point (KOP)					
UL	Section	Township	p Range	Lot	Ft. from N/S	Ft. from E/W			Longitude		County	
F	23	18 S	34 E		2542' FNL	1617' FWI	L 32.733543°	N 10	3.534371	° W	LEA	
						First Take	Point (FTP)					
UL	Section	Township	p Range	Lot	Ft. from N/S	Ft. from E/W			Longitude		County	
F	23	18 S	34 E		2542' FNL	. 1617' FWI	L 32.733543°	N 10	3.534371	° W	LEA	
						Last Take	Point (LTP)					
UL	Section	Township	p Range	Lot	Ft. from N/S	Ft. from E/W	Latitude		Longitude		County	
D	14	18 S	34 E		100' FNL	1620' FW	L 32.754774° I	N 10:	3.534407	7° W	LEA	
Unitiz	ed Area or	r Area of	Uniform In	iterest	Spacing U	init Type 🛚 Hori	izontal		Ground F		ation:	
		-		-					4000.	4		
							n (m. 1)			86.8 X		
			IFICATION				SURVEYOR CERT	IFICATION OF THE PROPERTY OF T	ONS			
					rein is true and comp cal or directional well		I hereby certify that the					
organiz	ation either	owns a u	vorking intere	st or un	leased mineral interes	it in the land	was plotted from field not or under my supervision,	•	•	-		
ocation	pursuant t	to a contra	ect with an o	wner of	a right to drill this a working interest or	unleased mineral	correct to the best of my				E. HENDA	
	or to a vo	0.2	oling agreem	ent or a	compulsory pooling o	rder heretofore			,	11/1/	W MEXICO T	
				- anadify	Alad dlin amagnication	ten encoured the	2 1	/	. 1	4/8	6/2/	
If this well is a horizontal well, I further certify that this organization has received the					ing interest or unlease	ed mineral interest	1/ 1/7/		//_		(29026)) 1	
	touch (in t				which any part of the pooling order from the		Kamoere	nour		1		
n each		THELL UT OU										
n each					11/0/2	1			11/7/202	48	\\\\\\\\\\.	
n each	will be loc				U(12/2	.4	Signature and Seal of Profes	ssional Surve	11/7/202 yor	A PORES	S/ONAL SURVEYO	
n each	will be loc				W(12/2	.1	Signature and Seal of Profes	ssional Surve	11/7/202	A PORTS	S/ONAL SURVEY	
n each	will be loc				W(n/2 Date	.4	Signature and Seal of Profes Certificate Number	essional Surve		A PORES	SONAL SURVEYS	

ACREAGE DEDICATION PLATS

This grid represents a standard section. You may superimpose a non-standard section, or larger area, over this grid. Operators must outline the dedicated acreage in a red box, clearly show the well surface location and bottom hole location, if it is directionally drilled, with dimensions from the section lines in the cardinal directions. If this is a horizontal wellbore show on this plat the location of the First Take Point and Last Take Point, and the point within the Completed interval (other than the First Take Point or Last Take Point) that is closest to any outer boundary of the tract.

Surveyors shall use the latest United States government survey or dependent resurvey. Well locations will be in reference to the New Mexico Principal Meridian. If the land is not surveyed, contact the OCD Engineering Bureau. Independent subdivision surveys will not be acceptable.



Released to Imaging: 11/26/2024 2:37:10 PM

C - 102

Submit Electronically

State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION	Revised July		
OIL CONSERVATION DIVISION		☐ Initial Submittal	
	Submittal	Amended Report	

VIG	OCD Tell	arcenig						Submittal Type:	Amer	ded Report
									☐ As Dı	rilled
					WE	LL LOCATION	INFORMATION			
API N	umber	-		Pool C	Code		Pool Name			
30-025-53152 962 Airstrip; Bone Spring, North										
-	rty Code			Proper	rty Name				Well Nun	
	618					WELLER 14	STATE COM			20IH
OGRID				Operat	tor Name		0.004541114			Level Elevation
	13069						AS COMPANY			000.4'
Surfac	ce Owner:	☐ State	Fee T	ribal 📙	Federal		Mineral Owner: State F	ee Tribal Feder	al	
						Surface L	ocation			
UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude		County
Е	23	18 S	34 E		2425' FNL	IIIO' FWL	32.733864° N	103.536020	o° W	LEA
						Bottom Hole	Location			
UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude		County
С	14	18 S	34 E		100' FNL	1620' FWL	32.754774° N	103.534407	7° W	LEA
Dedica	ted Acres	li	nfill or De	lining W	ell Defining Well	I API	Overlapping Spacing Unit (Y	/N) Consolida	tion Code	
320)		D		30-025-5	3152	N	С		
Order	Numbers.					1	Well setbacks are under Con	nmon Ownership:	Yes 🔲 1	Мо
						Kick Off Po	int (KOP)			
UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude		County
F	23	18 S	34 E		2542' FNL	1617' FWL	32.733543° N	103.53437	I° W	LEA
						First Take P	oint (FTP)			
UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude		County
F	23	18 S	34 E		2542' FNL	1617' FWL	32.733543° N	103.53437	I° W	LEA
						Last Take Po	oint (LTP)			
UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude		County
D	14	18 S	34 E		100' FNL	1620' FWL	32.754774° N	103.53440	7° W	LEA
Unitize	ed Area or	r Area of	Uniform Ir	terest	Spacing Un	nit Type 🖄 Horizo	ntal Vertical	Ground I	Floor Eleva	tion:
								, 3000		

OPERATOR CERTIFICATIONS

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and, if the well is vertical or directional well, that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of a working interest or unleased mineral interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

If this well is a horizontal well, I further certify that this organization has received the consent of at least one lessee or owner of a working interest or unleased mineral interes in each tract (in the target pool or formation) in which any part of the well's completed

interval will be located or obtained a compulsory pooling order from the division 112/24

Signature Date

Ryan Bruner

ryanb@lario.net E-mail Address

SURVEYOR CERTIFICATIONS

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me and E. HENDER or under my supervision, and that the same is true and correct to the best of my belief.

7/2024 11

Signature and Seal of Professional Surveyor

Certificate Number Date of Survey

29026

5/5/2024 Note: No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

DA

29026

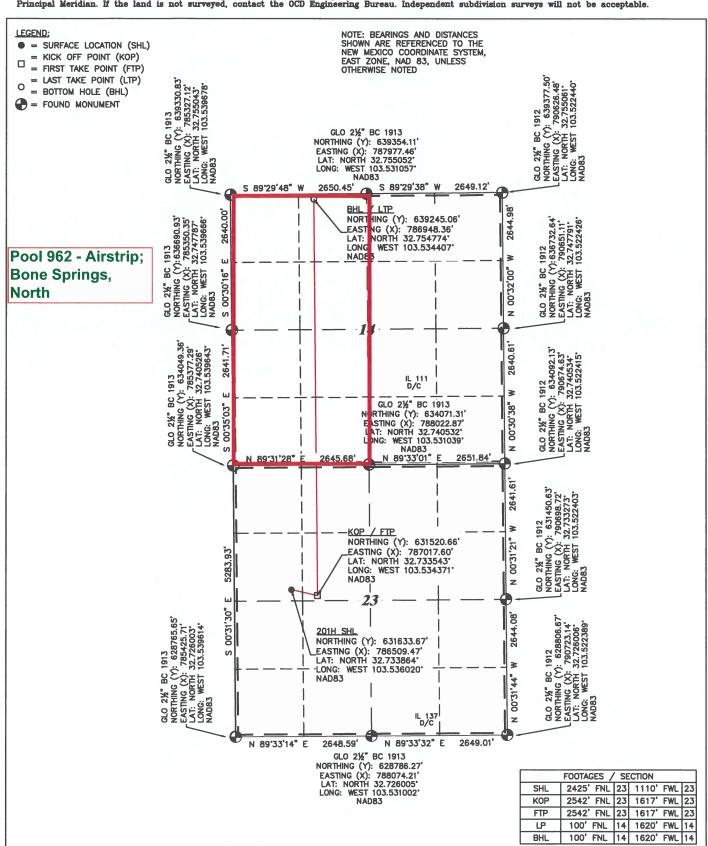
SONAL SURVED

Released to Imaging: 11/26/2024 2:37:10 PM

ACREAGE DEDICATION PLATS

This grid represents a standard section. You may superimpose a non-standard section, or larger area, over this grid. Operators must outline the dedicated acreage in a red box, clearly show the well surface location and bottom hole location, if it is directionally drilled, with dimensions from the section lines in the cardinal directions. If this is a horizontal wellbore show on this plat the location of the First Take Point and the point within the Completed interval (other than the First Take Point or Last Take Point) that is closest to any outer boundary of the tract.

Surveyors shall use the latest United States government survey or dependent resurvey. Well locations will be in reference to the New Mexico Principal Meridian. If the land is not surveyed, contact the OCD Engineering Bureau. Independent subdivision surveys will not be acceptable.



Released to Imaging: 11/26/2024 2:37:10 PM

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 406674

CONDITIONS

Operator:	OGRID:
LARIO OIL & GAS CO	13089
301 S. Market St.	Action Number:
Wichita, KS 67202	406674
	Action Type:
	[C-103] NOI Change of Plans (C-103A)
CONDITIONS	

CONDITIONS

Created By	Condition	Condition Date
pkautz	ALL PREVIOUS COA'S APPLY	11/26/2024