

State of New Mexico  
Phone: (505) 476-3441  
General Information  
Phone: (505) 629-6116

State of New Mexico  
Energy, Minerals and Natural Resources

Page 1 of 2  
Form C-103  
Revised July 18, 2013

Online Phone Directory Visit:  
<https://www.emnrd.nm.gov/oed/contact-us/>

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

<p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)</p>		<p>WELL API NO. <u>30-015-32585</u></p>
<p>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>SWD</u></p>		<p>5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/></p>
<p>2. Name of Operator <u>Select Water Solutions, LLC</u></p>		<p>6. State Oil &amp; Gas Lease No.</p>
<p>3. Address of Operator <u>1820 N I-35, Gainesville TX 76240</u></p>		<p>7. Lease Name or Unit Agreement Name <u>Oxy Dome Slawm Federal</u></p>
<p>4. Well Location Unit Letter <u>I</u> : <u>1780</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>East</u> line Section <u>29</u> Township <u>17S</u> Range <u>31E</u> NMPM County <u>Eddy</u></p>		<p>8. Well Number <u>#002</u></p>
<p>11. Elevation (Show whether DR, RKB, RT, GR, etc.)</p>		<p>9. OGRID Number <u>289068</u></p>
		<p>10. Pool name or Wildcat <u>Wolfcamp</u></p>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <u>Cleanout</u> <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

Request to perform cleanout operations on SWD. Expected Rig Up week of 21st April.

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

[Signature]

TITLE

Reg. Compliance

DATE

4/9/25

Type or print name

David Cheek

E-mail address:

dcheek@selectwater.com

PHONE:

405-482-7508

For State Use Only

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):

Sante Fe Main Office  
Phone: (505) 476-3441

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CONDITIONS

Action 450412

CONDITIONS

Operator: SELECT WATER SOLUTIONS, LLC 1820 N I-35 Gainesville, TX 76240	OGRID: 289068
	Action Number: 450412
	Action Type: [C-103] NOI General Sundry (C-103X)

CONDITIONS

Created By	Condition	Condition Date
ward.rikala	Notify the OCD via email 24 Hours Prior to beginning operations.	4/11/2025
ward.rikala	No change to tubing size or packer setting depth is approved.	4/11/2025
ward.rikala	An MIT must be performed and witnessed prior to this well being returned to injection.	4/11/2025