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| Santa 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 | Form C-103 August 1, 2011 Permit 392888 | | | | | | | | | | | | | | | | | | | | |
| | | WELL API NUMBER 30-025-52661 | | | | | | | | | | | | | | | | | | | | |
| | | 5. Indicate Type of Lease State | | | | | | | | | | | | | | | | | | | | |
| | | 6. State Oil & Gas Lease No. | | | | | | | | | | | | | | | | | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS (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.) | | 7. Lease Name or Unit Agreement Name CORIANDER 1 12 STATE COM | | | | | | | | | | | | | | | | | | | | |
| 1. Type of Well: Oil | | 8. Well Number 303H | | | | | | | | | | | | | | | | | | | | |
| 2. Name of Operator Coterra Energy Operating Co. | | 9. OGRID Number 215099 | | | | | | | | | | | | | | | | | | | | |
| 3. Address of Operator 6001 Deauville Blvd, 300N, Midland, TX 79706 | | 10. Pool name or Wildcat | | | | | | | | | | | | | | | | | | | | |
| 4. Well Location Unit Letter <u>A</u> : <u>211</u> feet from the <u>N</u> line and feet <u>671</u> from the <u>E</u> line Section <u>1</u> Township <u>23S</u> Range <u>32E</u> NMPM County <u>Lea</u> | | | | | | | | | | | | | | | | | | | | | | |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.) 3749 GR | | | | | | | | | | | | | | | | | | | | | | |
| Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____ | | | | | | | | | | | | | | | | | | | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <table style="width: 100%;"> <tr> <td colspan="2"> NOTICE OF INTENTION TO: </td> <td colspan="2"> SUBSEQUENT REPORT OF: </td> </tr> <tr> <td> PERFORM REMEDIAL WORK <input type="checkbox"/> </td> <td> PLUG AND ABANDON <input type="checkbox"/> </td> <td> REMEDIAL WORK <input type="checkbox"/> </td> <td> ALTER CASING <input type="checkbox"/> </td> </tr> <tr> <td> TEMPORARILY ABANDON <input type="checkbox"/> </td> <td> CHANGE OF PLANS <input type="checkbox"/> </td> <td> COMMENCE DRILLING OPNS. <input type="checkbox"/> </td> <td> PLUG AND ABANDON <input type="checkbox"/> </td> </tr> <tr> <td> PULL OR ALTER CASING <input type="checkbox"/> </td> <td> MULTIPLE COMPL <input type="checkbox"/> </td> <td> CASING/CEMENT JOB <input type="checkbox"/> </td> <td></td> </tr> <tr> <td colspan="2"> Other: _____ </td> <td colspan="2"> Other: Spud <input checked="" type="checkbox"/> </td> </tr> </table> | | | NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | | PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTER CASING <input type="checkbox"/> | TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE OF PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> | | Other: _____ | | Other: Spud <input checked="" type="checkbox"/> | |
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| Other: _____ | | Other: Spud <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. 6/20/2025 Spudded well. 06/20/2025 Spudded well. The Coriander 1-12 State COM 303H well was spudded on 06/20/2025 with the Cactus 163 rig. | | | | | | | | | | | | | | | | | | | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/> . | | | | | | | | | | | | | | | | | | | | | | |
| SIGNATURE <u>Electronically Signed</u> TITLE <u>Regulatory Compliance Manager</u> | | DATE <u>6/30/2025</u> | | | | | | | | | | | | | | | | | | | | |
| Type or print name <u>Phillip Levasseur</u> E-mail address <u>phillip.levasseur@coterra.com</u> | | Telephone No. <u>412-759-4585</u> | | | | | | | | | | | | | | | | | | | | |
| For State Use Only: | | | | | | | | | | | | | | | | | | | | | | |
| APPROVED BY: <u>Keith Dziokonski</u> TITLE <u>Petroleum Specialist A</u> | | DATE <u>7/1/2025</u> | | | | | | | | | | | | | | | | | | | | |