

RECEIVED 6-21-2017	REVIEWER PRG	TYPE SWD	APP NO DKOC1717255991
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ABOVE THIS TABLE FOR OCD DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
 - Geological & Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Applicant: Black River Water Management Company LLC **OGRID Number:** 371287
Well Name: Rustler Breaks SWD 2 **API:** 30-015-4328 (30-015-44240) KC
Pool: SWD, Devonian **Pool Code:** 96101

SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW

SWD - 1682

- 1) **TYPE OF APPLICATION:** Check those which apply for [A]
- A. Location - Spacing Unit - Simultaneous Dedication
 NSL NSP (PROJECT AREA) NSP (PRORATION UNIT) SD
- B. Check one only for [I] or [II]
- [I] Commingling - Storage - Measurement
 DHC CTB PLC PC OLS OLM
- [II] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR

- 2) **NOTIFICATION REQUIRED TO:** Check those which apply.
- A. Offset operators or lease holders
 B. Royalty, overriding royalty owners, revenue owners
 C. Application requires published notice
 D. Notification and/or concurrent approval by SLO
 E. Notification and/or concurrent approval by BLM
 F. Surface owner
 G. For all of the above, proof of notification or publication is attached, and/or,
 H. No notice required

FOR OCD ONLY	
<input type="checkbox"/>	Notice Complete
<input type="checkbox"/>	Application Content Complete

3) **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division

Note: Statement must be completed by an individual with managerial and/or supervisory capacity

Brian Wood

 Print or Type Name

 Signature

6-21-17

 Date

 505 466-8120

 Phone Number

 brian@permitswest.com

 e-mail Address

APPLICATION FOR AUTHORIZATION TO INJECT

I PURPOSE Secondary Recovery Pressure Maintenance **XXX** Disposal Storage
Application qualifies for administrative approval? Yes No

II OPERATOR BLACK RIVER WATER MANAGEMENT COMPANY, LLC

ADDRESS 5400 LBJ FREEWAY, SUITE 1500, DALLAS TX 75240

CONTACT PARTY BRIAN WOOD (PERMITS WEST, INC.) PHONE 505 466-8120

III WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection
Additional sheets may be attached if necessary

IV Is this an expansion of an existing project? Yes **XXX** No
If yes, give the Division order number authorizing the project _____

V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well This circle identifies the well's area of review

VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone
Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.

Rustler Breaks SWD 2
(Devonian (96101))

VII Attach data on the proposed operation, including
1 Proposed average and maximum daily rate and volume of fluids to be injected,
2 Whether the system is open or closed,
3 Proposed average and maximum injection pressure,
4 Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water, and,
5 If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc)

*VIII Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval

IX Describe the proposed stimulation program, if any

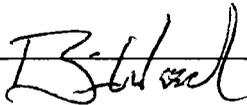
*X Attach appropriate logging and test data on the well (If well logs have been filed with the Division, they need not be resubmitted)

*XI Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken

XII Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water

XIII Applicants must complete the "Proof of Notice" section on the reverse side of this form

XIV Certification I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief

NAME BRIAN WOOD  TITLE CONSULTANT

SIGNATURE _____ DATE JUNE 6, 2017

E-MAIL ADDRESS brian@permitswest.com

* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted
Please show the date and circumstances of the earlier submittal _____

III WELL DATA

A The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include

- (1) Lease name, Well No., Location by Section, Township and Range, and footage location within the section
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined
- (3) A description of the tubing to be used including its size, lining material, and setting depth
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used

Division District Offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name
- (2) The injection interval and whether it is perforated or open-hole
- (3) State if the well was drilled for injection or, if not, the original purpose of the well
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations
- (5) Give the depth to and the name of the next higher and next lower oil or gas zone in the area of the well, if any

XIV PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include

- (1) The name, address, phone number, and contact party for the applicant,
- (2) The intended purpose of the injection well, with the exact location of single wells or the Section, Township, and Range location of multiple wells,
- (3) The formation name and depth with expected maximum injection rates and pressures, and,
- (4) A notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED

NOTICE Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

INJECTION WELL DATA SHEET

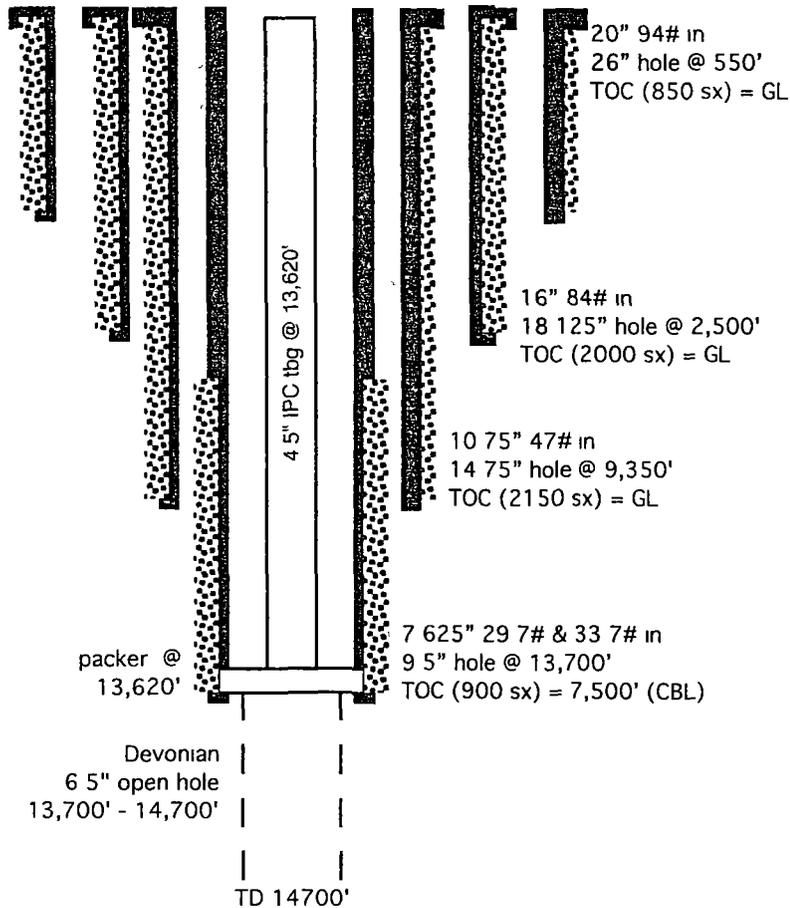
OPERATOR BLACK RIVER WATER MANAGEMENT COMPANY, LLC

WELL NAME & NUMBER RUSTLER BREAKS SWD 2

WELL LOCATION 1064' FNL & 230' FWL D (LOT 4) 6 24 S 28 E
 FOOTAGE LOCATION UNIT LETTER SECTION TOWNSHIP RANGE

WELLBORE SCHEMATIC

(not to scale)



WELL CONSTRUCTION DATA

Surface Casing

Hole Size 26" Casing Size 20"
 Cemented with 850 sx or _____ ft³
 Top of Cement SURFACE Method Determined VISUAL

Intermediate Casing

Hole Size 18.125" & 14.75" Casing Size 16" & 10.75"
 Cemented with 2,000 & 2,150 sx or _____ ft³
 Top of Cement SURFACE Method Determined VISUAL

Production Casing

Hole Size 9.5" Casing Size 7.625" @ 13,700'
 Cemented with 900 sx or _____ ft³
 Top of Cement 7,500' Method Determined CBL
 Total Depth 14,700'

Injection Interval

13,700' feet to 14,700'

(Perforated or Open Hole, indicate which)



INJECTION WELL DATA SHEET

Tubing Size: 4-1/2" Lining Material: IPC

Type of Packer STAINLESS STEEL &/OR NICKEL

Packer Setting Depth: 13,620'

Other Type of Tubing/Casing Seal (if applicable): _____

Additional Data

1. Is this a new well drilled for injection? XXX Yes No

If no, for what purpose was the well originally drilled? _____

2. Name of the Injection Formation. DEVONIAN

3. Name of Field or Pool (if applicable) SWD; DEVONIAN (POOL CODE 96101)

4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used. _____

NO

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: _____

OVER: BONE SPRING (5894'), WOLFCAMP (9257'), ATOKA (11515'),
& MORROW (12037')

UNDER: none

BLACK RIVER WATER MANAGEMENT COMPANY, LLC
RUSTLER BREAKS SWD 2
1064' FNL & 230' FWL
SEC. 6, T. 24 S., R. 28 E., EDDY COUNTY, NM

PAGE 1

30-015-44240

I. Goal is to drill a 14,700' deep commercial saltwater disposal well. Proposed disposal interval will be 13,700' - 14,700' in the SWD; Devonian (96101). See Exhibit A for C-102 and map.

II. Operator: Black River Water Management Company, LLC [OGRID 371287]

Operator phone number: (972) 371-5420

Operator address: 5400 LBJ Freeway, Suite 1500
Dallas TX 75240

Contact for Application: Brian Wood (Permits West, Inc.)
Phone: (505) 466-8120

- III. A. (1) Lease name: Rustler Breaks SWD (fee)
Well name and number: Rustler Breaks SWD 2
Location: 1064' FNL & 230' FWL, Section 6, T. 24 S., R. 28 E.
- A. (2) Surface casing (20", 94#, K-55, BTC) will be set at 550' in a 26" hole and cemented to the surface with 850 sacks.
- First intermediate casing (16", 84#, K-55, BTC) will be set at 2,500' in an 18.125" hole and cemented to surface with 2,000 sacks
- Second intermediate casing (10.75", 47#, P-110HC) will be set at 9,350' in a 14.75" hole and cemented to surface with 2,150 sacks.
- Production casing (7.625", 29.7# P-110 HC, BTC (GL - 9400') & 33.7# P-110 EC, BTC (9400' - 13,670')) will be set at 13,700' in a 9.5" hole and cemented to 7,500' (CBL) with 900 sacks.
- A 6.5" open hole will be drilled to 14,700'.
- A. (3) Tubing will be IPC, 4.5", 11.6#, P-110, BTC. Setting depth will be ≈13,620'. (Disposal interval will be 13,700' to 14,700'.)

BLACK RIVER WATER MANAGEMENT COMPANY, LLC
RUSTLER BREAKS SWD 2
1064' FNL & 230' FWL
SEC. 6, T. 24 S., R. 28 E., EDDY COUNTY, NM

PAGE 1

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371287

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**BLACK RIVER WATER MANAGEMENT COMPANY, LLC
 RUSTLER BREAKS SWD 2
 1064' FNL & 230' FWL
 SEC. 6, T. 24 S., R. 28 E., EDDY COUNTY, NM**

- A. (4) A stainless steel and/or nickel packer will be set at $\approx 13,620'$ (or $\leq 100'$ above the top of the open hole which will be at 13,700').
- B. (1) Disposal zone will be the Devonian (SWD; Devonian (96101) pool). Estimated fracture gradient is ≈ 0.62 to ≈ 0.68 psi per foot. Variation depends on whether limestone or dolomite.
- B. (2) Disposal interval will be open hole from 13,700' to 14,700'.
- B. (3) Well has not been drilled. It will be drilled as a saltwater disposal well.
- B. (4) No perforated intervals are in the well.
- B. (5) Only producing well in the area of review and above the Devonian (13,663') is a Morrow gas well (TD = 12,900'). A Wolfcamp (TVD = 10,240') well has been spudded, but not yet completed. No oil or gas zones are below the Devonian in the area of review.

IV. This is not an expansion of an existing injection project. It is disposal only.

V. Exhibit B shows and tabulates the 6 existing wells (2 gas + 4 P&A) within a half-mile radius. Exhibit C shows all 62 existing wells (30 oil or gas wells + 20 P & A wells + 10 water wells + 2 disposal wells) within a two-mile radius.

Exhibits D and E shows all leases and lessors within a half-mile radius and two-mile radius. There are BLM, fee, and State leases within each radius. Details on the leases within a half-mile are:

Aliquot Parts in Area of Review	Lessor	Lease	Lessee(s) of Record
E2SE4 & SWSE 36-23s-27e	NMSLO	VA-1884-0001	EOG Y
W2SW4 & SESW 31-23s-28e	fee	various fee	Featherstone, Nadel & Gussman, and OGX
SWSE 31-23s-28e	BLM	NMNM-121941	Matador
NE4 & N2SE4 1-24s-27e	NMSLO	LG-0023-0005	Chevron

**BLACK RIVER WATER MANAGEMENT COMPANY, LLC
 RUSTLER BREAKS SWD 2
 1064' FNL & 230' FWL
 SEC. 6, T. 24 S., R. 28 E., EDDY COUNTY, NM**

NWNE & NENW 6-24s-28e	BLM	NMNM-136210	Matador
NWNW, S2NW4, NWSE, & N2SW4 6-24s-28e	fee	various fee	Devon, DMD, Featherstone, Marbob (COG), & Mewbourne

VI. One well (30-015-10842) within ½ mile penetrated the Devonian (top = 13,663'). That currently P&A well was approved for disposal in the Devonian, but the C-101 was denied. Exhibit F has further details and a P&A diagram.

- VII. 1. Average injection rate will be ≈30,000 bwpd.
 Maximum injection rate will be ≈40,000 bwpd.
2. System will be open and closed. Water will both be trucked and piped.
3. Average injection pressure will be ≈2,500 psi
 Maximum injection pressure will be 2,740 psi (= 0.2 psi/foot x 13,700' (top of open hole)).
4. Disposal water will be produced water, mainly from Bone Spring and Wolfcamp wells. There are 177 approved Bone Spring wells and 414 approved Wolfcamp wells in T. 23 S., R. 27 & 28 E. and T. 24 S., R. 27 & 28 E. The well will take other Permian Basin waters (e. g., Delaware). A summary of water analyses follows. Their abstracts are in Exhibit G.

Parameter	Devonian	Delaware	Bone Spring	Wolfcamp	Morrow
Bicarbonate	1260	122	1,955	1,026	611
Chloride	34,400	130,543	100,110	67,273	33,036
Sulfate	3,600	940	180	88	0
TDS	63,260	211,635	165,550	111,226	54,903

No compatibility problems have been reported from the two closest (≤7,000') operating Devonian disposal wells (30-015-21643 & 30-015-43807). The 14,966,767 barrels that have been disposed to date include Delaware, Bone Spring, Strawn, Atoka, and Morrow waters.

5. No Devonian producer is within a minimum 5-mile radius.

VIII. The Devonian (1,110' thick) is comprised of limestone and dolomite. It dips to the east at 1°. Average porosity is 4-6%. Closest possible underground source of drinking water above the proposed disposal interval is the Quaternary at the surface. According to State Engineer records (Exhibit H), no water well is within 1-mile. However, a flowing windmill ≈2,500' northeast was found on May 16, 2017. No underground source of drinking water is below the proposed disposal interval.

Formation tops are:

Quaternary = 0'
Castile = 784'
Lamar (base of salt) = 2405'
Bell Canyon = 2438'
Cherry Canyon = 3248'
Brushy Canyon = 4390'
Bone Spring limestone = 5894'
Wolfcamp = 9257'
Wolfcamp B = 9634'
Strawn = 11196'
Atoka = 11515'
Morrow = 12037'
Barnett = 13149'
Mississippian limestone = 13236'
Woodford shale = 13593'
Devonian carbonate = 13663'
disposal interval = 13700' - 14700'
Devonian dolomite = 13813'
TD = 14700'
(Montoya = 14773')

No water wells are within a 1-mile radius according to State Engineer records (Exhibit H). However, a flowing windmill ≈2500' northeast, and not in State records, was found during a May 16, 2017 field inspection and sampled. A second sample was collected from a tank ≈9400' east. It is not in State records either. There will be >12,800' of vertical separation and a salt interval between the bottom of the only likely underground water source (Quaternary) and the top of the Devonian. Over 18,119,943 barrels of water have been disposed into the Devonian within T24S-R28E and the 3 closest townships.

IX. The well will be stimulated with acid.

X. A CBL will be run from production casing setting depth to TOC. A quad combo log will be run throughout the disposal interval.

XI. Based on a May 16, 2017 field inspection and a review of the State Engineer's records, one active water well is within a one-mile radius.

XII. Black River (Exhibit I) is not aware of any geologic or engineering data that may indicate the Devonian is in hydrologic connection with any underground sources of water. Deepest water well within a 2-mile radius is 340'. There are 151 approved Devonian saltwater disposal wells and 11 approved Devonian water injection wells in New Mexico. Closest Quaternary fault is \approx 51 miles southwest (Exhibit I).

XIII. A legal ad (see Exhibit J) was published on May 23, 2017. Notice (this application) has been sent (Exhibit K) to the surface owner (Vickie Connally), well operators (EOG Y and Mewbourne), government lessors (BLM, NMSLO), and all lessees (Chevron, Devon, DMD, EOG Y, Featherstone, Marbob (COG), Mewbourne, Nadel & Gussman, and OGX) within a half-mile.

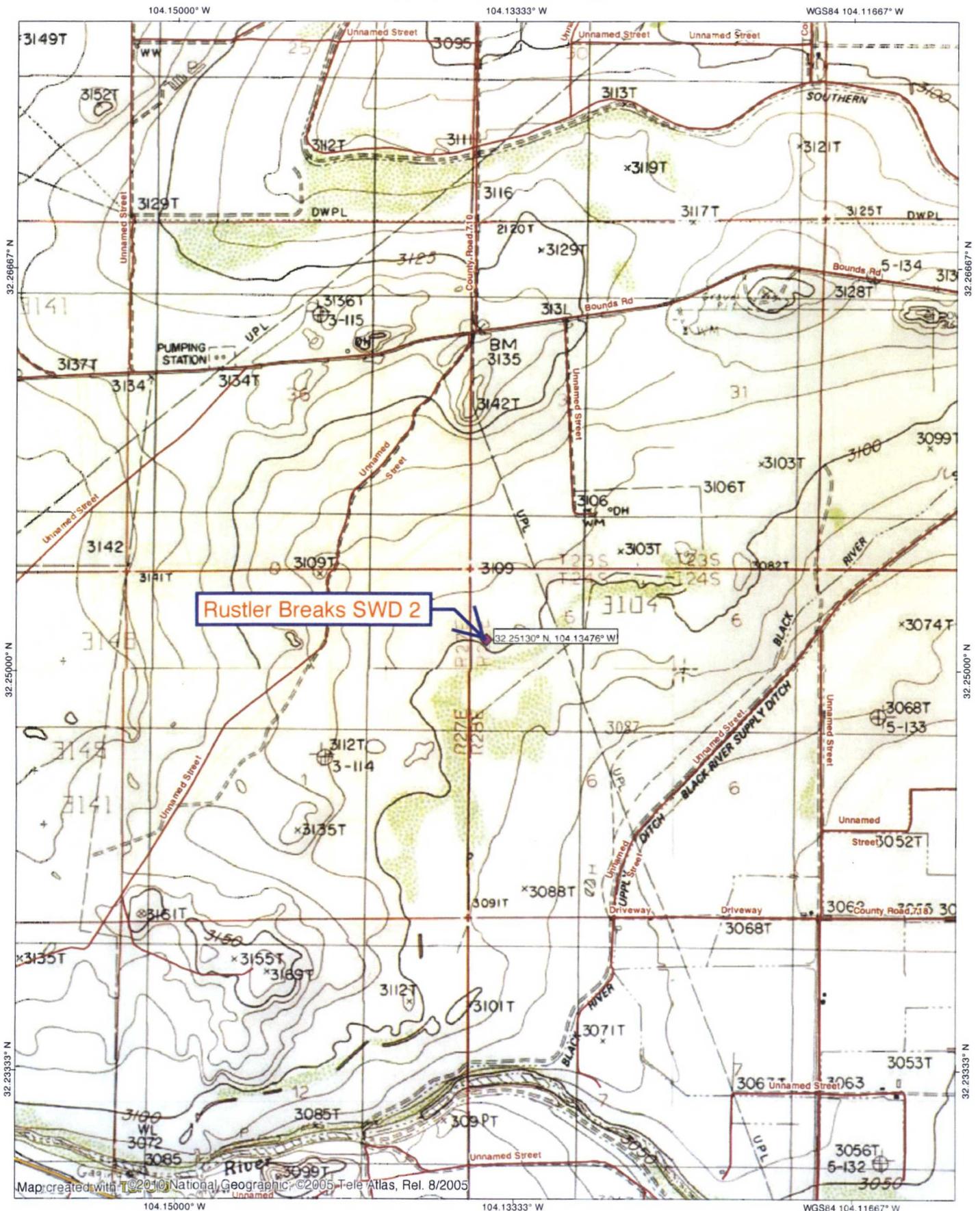


EXHIBIT A

TN*MN
7°
05/19/17

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 Road, Aztec, NM 87410
Phone (505) 334-6178 Fax. (505) 334-6170
District IV
1220 S. St. Francis Dr, Sante Fe, NM 87505
Phone (505) 476-3460 Fax. (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources
Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Sante Fe, NM 87505

FORM C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-	² Pool Code 96101	³ Pool Name SWD; Devonian
⁴ Property Code	⁵ Property Name RUSTLER BREAKS SWD	⁶ Well Number #2.
⁷ OGRID No. 371287	⁸ Operator Name BLACK RIVER WATER MANAGEMENT, LLC.	⁹ Elevation 3105'

¹⁰Surface Location

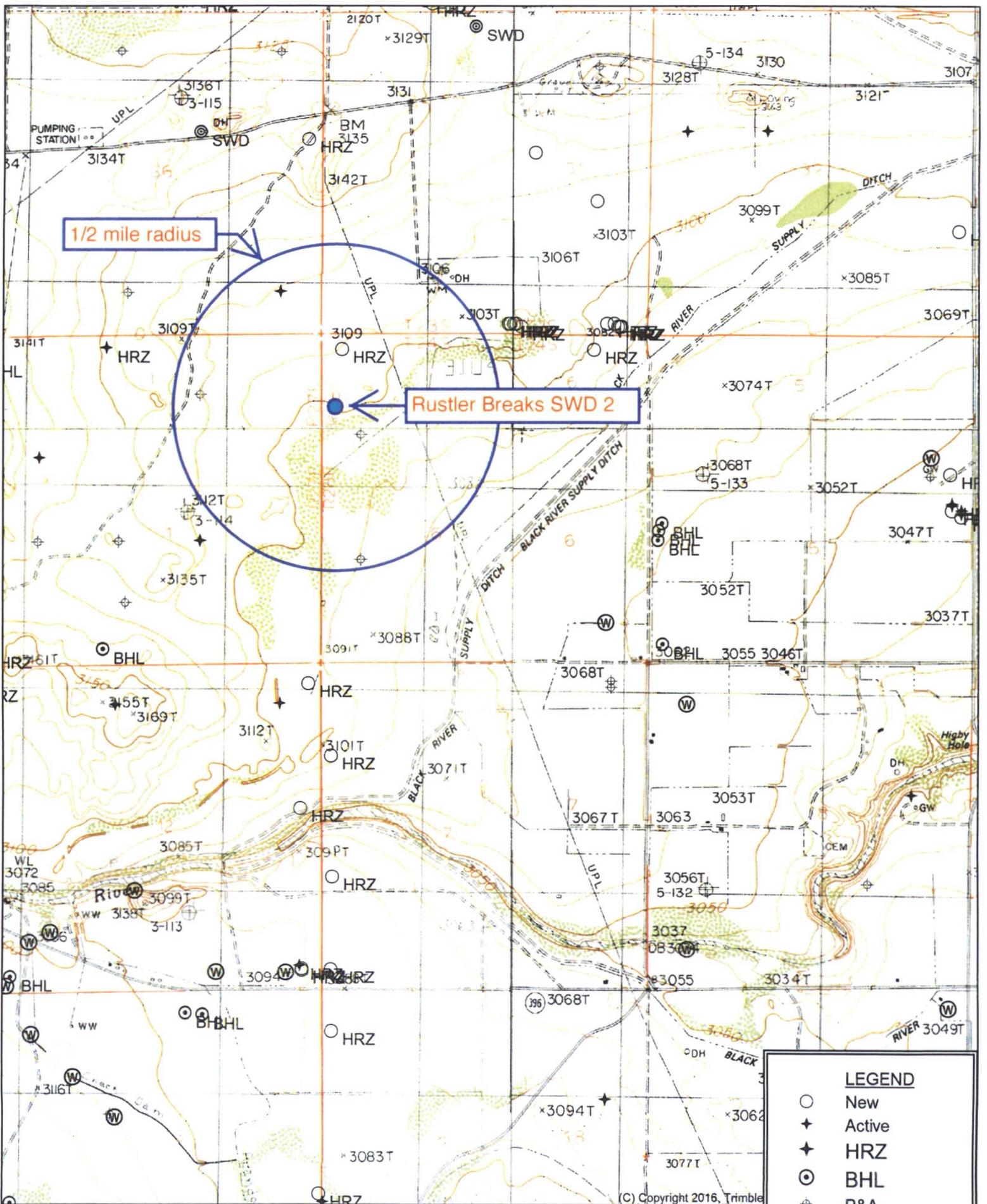
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
4	6	24-S	28-E	-	1064'	NORTH	230'	WEST	EDDY

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

¹² Dedicated Acres	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.

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.

	<p>SURFACE LOCATION NEW MEXICO EAST NAD1927 X=561541 Y=455155 LAT N 32.2511821 LONG W 104 1342649 NAD 1983 X=602724 Y=455214 LAT N 32 2513024 LONG W 104 1347605</p>	<p>¹⁷OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that the organization either owns a working interest or unless 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 such a mineral or working interest or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p><i>Brian Wood</i> 5-19-17 Signature Date</p> <p>Brian Wood Printed Name</p> <p>brian@permitswest.com E-mail Address</p> <p>(505) 466-8120</p>
		<p>¹⁸SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true to the best of my belief.</p> <p>05/18/2017 Date of Survey</p> <p>Signature and Seal of Professional Surveyor MICHAEL R. BROWN NEW MEXICO 18329 PROFESSOR</p> <p>EXHIBIT A Certificate Number</p>



1/2 mile radius

Rustler Breaks SWD 2

LEGEND	
○	New
+	Active
✦	HRZ
⊙	BHL
⊕	P&A
⊗	INJ
⊙	SWD
⊗	Water



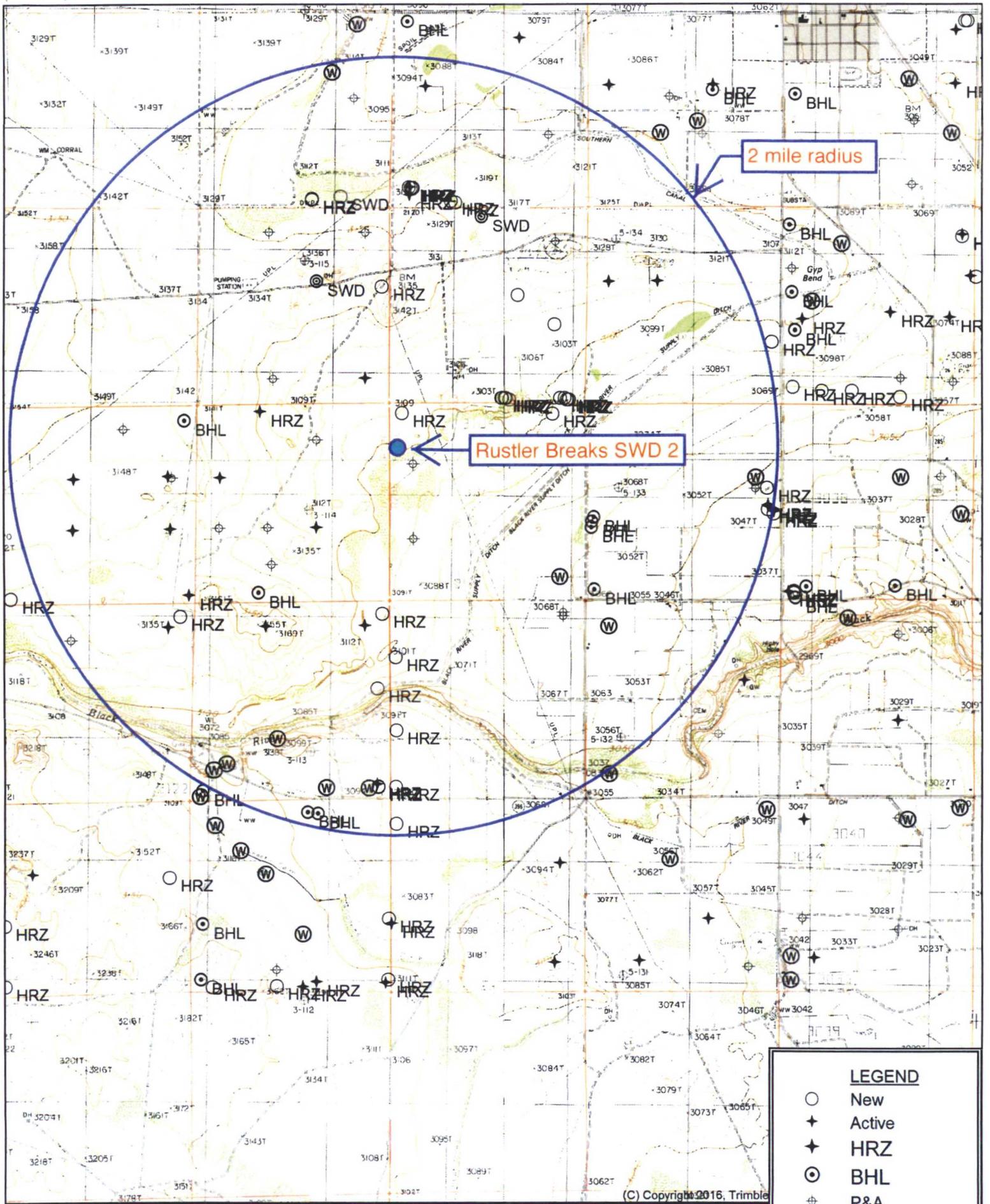
N

Quad: BOND DRAW
Scale: 1 inch = 2,000 ft.

EXHIBIT B

(C) Copyright 2016, Trimble

API	OPERATOR	RANGE	UNIT LETTER OR LOT	SECTION	TOWNSHIP	TVD	WELL	WELL TYPE	ZONE	FEET FROM SWD
3001532818	COG	28E	5	6	24 0S	12820	EDSELS WAND WAVER FEE 001	P&A	MORROW	552
3001544140	MEWBOURNE	28E	4	6	24 0S	10240	MOTLEY 6 7 W2DE FED'L COM 001H	G	WOLFCAMP	884
3001533061	EOG Y	27E	P	36	23 0S	12900	CIGAR BCM STATE COM 002	G	MORROW	2172
3001510842	HNG	28E	N	31	23 0S	13935	PARDUE 31 COM 001	P&A	MORROW	2500
3001532640	COG	28E	6	6	24 0S	12820	NEFF'S CLOSE OLOGY FEE COM 001	P&A	MORROW	2566
3001523729	COG	27E	2	1	24 0S	12158	LOVING 1 STATE 001	P&A	WOLFCAMP	2608



2 mile radius

Rustler Breaks SWD 2

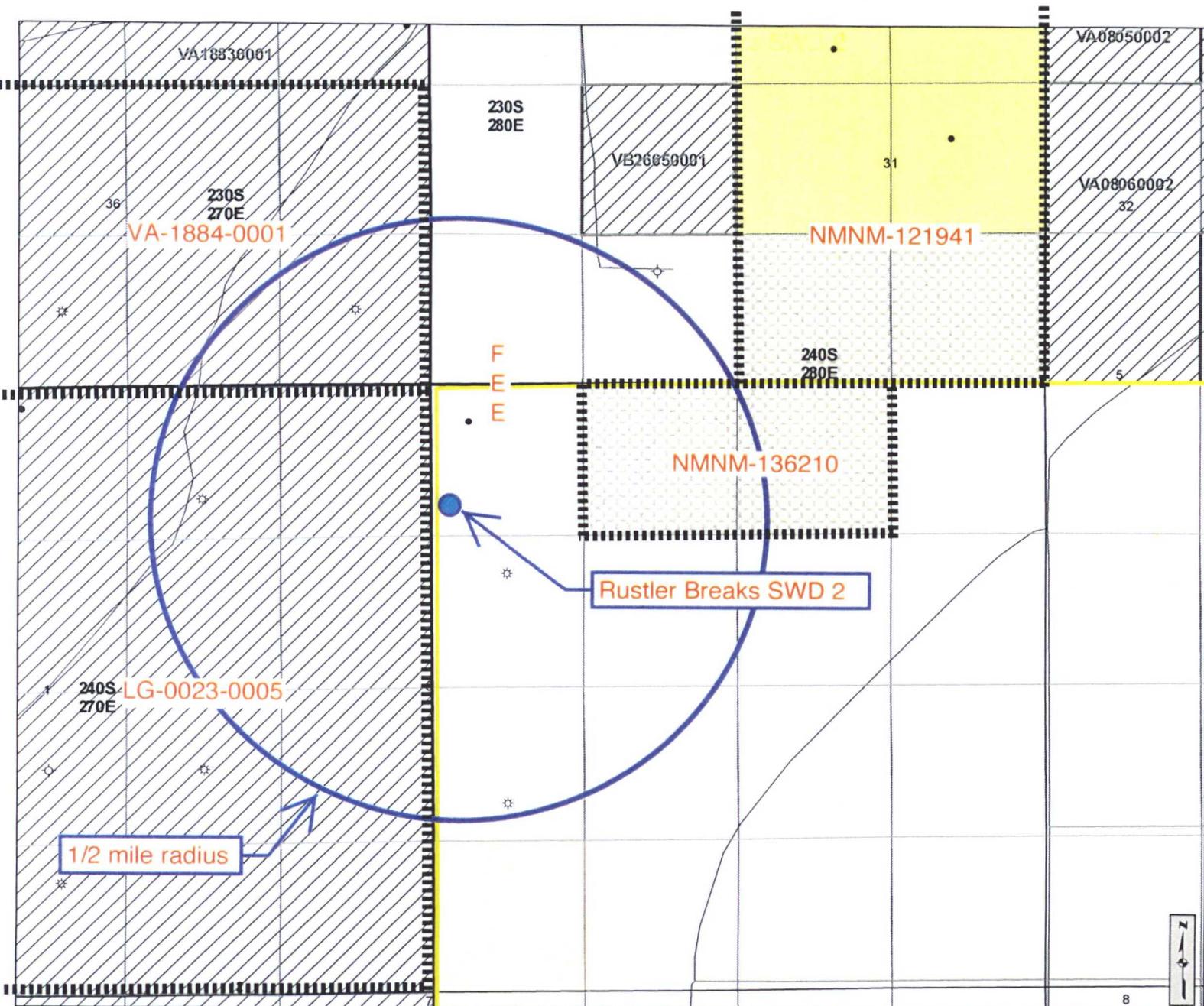
LEGEND

- New
- ✦ Active
- ✦ HRZ
- ⊙ BHL
- ⊕ P&A
- ⊙ INJ
- ⊙ SWD
- ⊙ W Water

Quad: BOND DRAW
Scale: 1 inch = 3,333 ft.

EXHIBIT C

(C) Copyright 2016, Trimble



- Cartographic Features**
- County Boundaries
 - County Seats
 - City, Town or Village
 - SLO District Offices
 - SLO District Boundary
 - Hwy Mileposts
 - Interstate
 - NM Hwy
 - US Hwy
 - Local Road
 - Continental Divide
- Federal Minerals Ownership**
- All Minerals
 - Coal Only
 - Oil and Gas Only
 - Oil, Gas and Coal Only
 - Other Minerals
- State Trust Lands**
- Surface Estate
 - Subsurface Estate
 - Surface and Subsurface Estate
- State Leases**
- Oil and Gas Leases
 - Agricultural Leases
 - Commercial Leases
 - Minerals Leases
 - Not Available for Oil and Gas Leasing
 - Oil and Gas Leasing Influenced by Restriction
- Oil and Gas Related Features**
- Oil and Gas Unit Boundary
 - Participating Areas in Units
 - Geologic Regions
 - Volcanic Vents
 - NMOCD Order R-111-P
 - Potash Enclave Outline
- NMOCD Oil and Gas Wells**
- CO₂
 - Injection
 - Oil
 - Water
 - Gas
 - Miscellaneous
 - Salt Water Disposal
 - DA or PA

New Mexico State Land Office
Oil, Gas and Minerals

0 0.05 0.1 0.2 0.3 0.4
 Miles

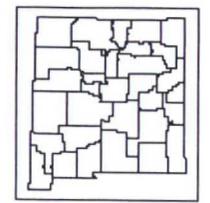
Universal Transverse Mercator Projection, Zone 13
 1983 North American Datum

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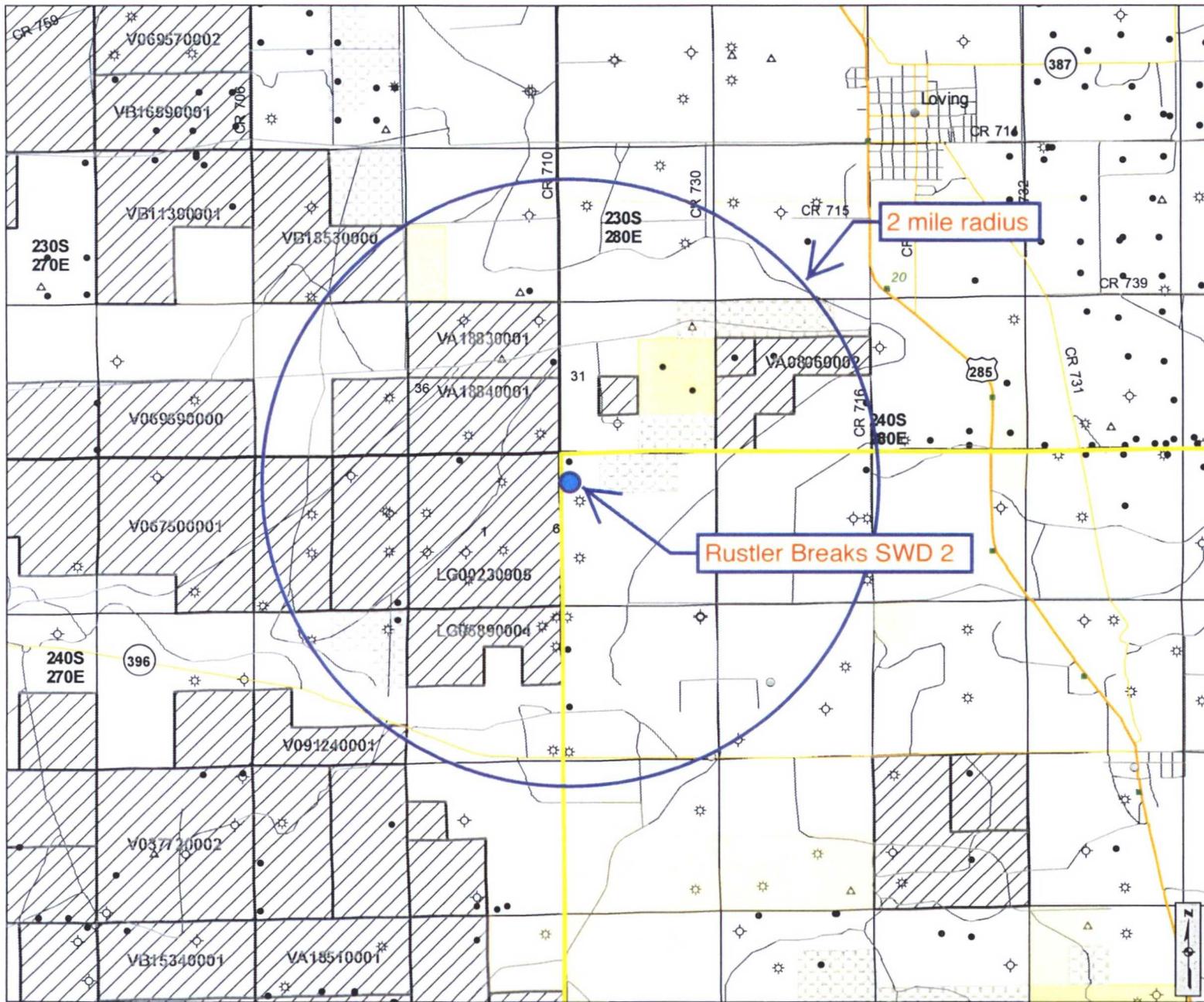
Land Office Geographic Information Center
 logic@slo.state.nm.us

Created On: 6/5/2017 11:00:04 AM

EXHIBIT D



www.nmstatelands.org



Cartographic Features

- County Boundaries
- County Seats
- City, Town or Village
- SLO District Offices
- SLO District Boundary
- Hwy Mileposts
- Interstate
- US Hwy
- NM Hwy
- Local Road
- Continental Divide

Federal Minerals Ownership

- All Minerals
- Coal Only
- Oil and Gas Only
- Oil, Gas and Coal Only
- Other Minerals

State Trust Lands

- Surface Estate
- Subsurface Estate
- Surface and Subsurface Estate

State Leases

- Oil and Gas Leases
- Agricultural Leases
- Commercial Leases
- Minerals Leases
- Not Available for Oil and Gas Leasing
- Oil and Gas Leasing Influenced by Restriction

Oil and Gas Related Features

- Oil and Gas Unit Boundary
- Participating Areas in Units
- Geologic Regions

- Volcanic Vents
- NMOC Order R-111-P
- Potash Enclave Outline

NMOC Oil and Gas Wells

- CO₂
- Gas
- Injection
- Miscellaneous
- Oil
- Salt Water Disposal
- Water
- DA or PA

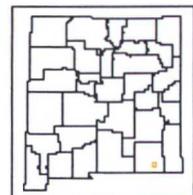
**New Mexico State Land Office
Oil, Gas and Minerals**

0 0.2 0.4 0.8 1.2 1.6 Miles
 Universal Transverse Mercator Projection, Zone 13
 1983 North American Datum

The New Mexico State Land Office assumes no responsibility or liability for, or in connection with, the accuracy, reliability or use of the information provided here, in State Land Office data layers or any other data layer.

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EXHIBIT E



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Created On: 6/5/2017 10:58:11 AM

EXISTING DEVONIAN PENETRATORS WITHIN AREA OF REVIEW

	DATES	TD	POOL	STATUS	HOLE O. D	CASING O. D.	SET @	SACKS CEMENT	TOC	HOW TOC DETERMINED
Pardue 31 Com 1	spud	PBTD	Strawn	P&A	17.5	13.375	467'	400	GL	CIRC
30-015-10842	6/25/66	12394	Morrow		12.25	9.625	3000'	1900	GL	CIRC
N-31-23s-28e	P&A	TVD	Devonian		8.75	7	11166	1150	1600'	no report
	4/7/74	13935			6.125	4.5	13675	175	11009'	TOL

Delaware Energy LLC.

Pardue 31 Com #1
990' FSL & 1980' FWL, UL N, SEC. 31, T23S R28E, Eddy County, NM
API # 30-015-10842

Drilled 04/07/1974

13-3/8", 48# Csg @ 467'
400 sx cmt, TOC @ surface (Calculated)

9 5/8", 36# Csg @ 3,000'
1900 sx cmt, TOC @ surface (Calculated)

Cmt plug from 6,694' - 6,515'

Csg cut and pulled @ 6,720'

Cmt plug from 6,700' - 6,566' (50 sx)

Cmt plug spotted from 11,170' - 10,910' (50 sx)

4-1/2" TOL @ 11,080'

7", 22# & 23# Csg @ 11,166'
400 sx cmt, TOC @ 7,652' (Calculated)

Perforations
Strawn: 11,220' - 11,235'
Marrow: 12,420' - 12,430'

4-1/2", 13.5# Csg @ 13,675'
175 sx cmt, TOC @ 11,423' (Calculated)

PBTD 12,394'
TD 13,935'

TD 12,770'

Cmt plug spotted from 180' - 69' w/ 50 sx

Cmt plug spotted from 2,975' - 2,676' w/ 50 sx cmt

Cmt plug spotted from 3,050' - 2,950' w/ 50 sx cmt

Side track window ~6,500'

Cmt plug spotted 10,753' - 10,622' w/ 25 sx

7", 23# Csg @ 10,700'
1000 sx cmt TOC Circulated

Cmt plug spotted 12,551' - 12,420' w/ 25 sx

CIRC.

*PULLED
1600' @ 7"*

*Run SBL after New 7" installed
if 6500 - 5000' is
perforative - when SSB
is open.*

NM WAIDS

DATA

MAPS

HOME

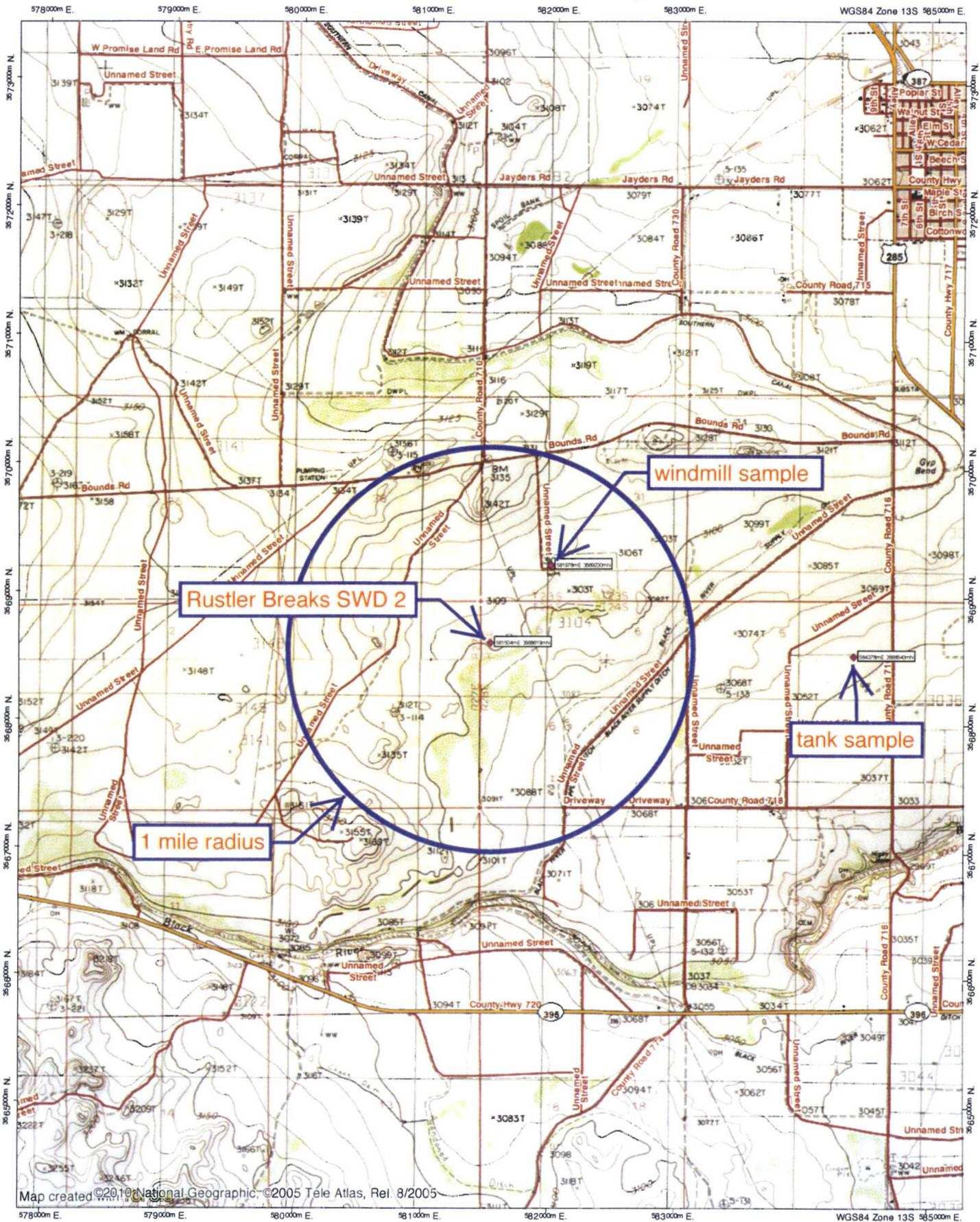
SCALE

CORROSION

General Information About: Sample 5199			
SQUARE LAKE DEEP UNIT 001			
API	3001503979	Sample Number	
Unit/Section/ Township/Range	J / 33 / 16 S / 30 E	Field	
County	Eddy	Formation	DEV
State	NM	Depth	
Lat/Long	32 87982 / -103.97885	Sample Source	DST
TDS (mg/L)	63260	Water Type	
Sample Date(MM/DD/YYYY)		Analysis Date(MM/DD/YYYY)	
Remarks/Description			
Cation Information (mg/L)		Anion Information (mg/L)	
Potassium (K)		Sulfate (SO)	3600
Sodium (Na)		Chloride (Cl)	34400
Calcium (Ca)		Carbonate (CO ₃)	
Magnesium (Mg)		Bicarbonate (HCO ₃)	1260
Barium (Ba)		Hydroxide (OH)	
Manganese (Mn)		Hydrogen Sulfide (H ₂ S)	
Strontium (Sr)		Carbon Dioxide (CO ₂)	
Iron (Fe)		Oxygen (O)	



EXHIBIT G



Map created ©2010 National Geographic, ©2005 Tele Atlas, Rel. 8/2005

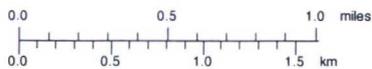


EXHIBIT H

TN MN



New Mexico Office of the State Engineer

Water Column/Average Depth to Water

(A CLW#### in the POD suffix indicates the POD has been replaced & no longer serves a water right file)

(R=POD has been replaced,
O=orphaned,
C=the file is closed)

(quarters are 1=NW 2=NE 3=SW 4=SE)
(quarters are smallest to largest) (NAD83 UTM in meters)

(In feet)

POD Number	Code	Sub-basin	County	Q 64	Q 16	Q 4	Sec	Tws	Rng	X	Y	Distance	DepthWell	DepthWater	Water Column
<u>C 01244</u>		C	ED	4	4	06	24S	28E		582860	3567543*	1731	109	70	39
<u>C 00232</u>		C	ED	1	3	2 07	24S	28E		582362	3566826*	1987	160		
<u>C 00406</u>		C	ED		1	1 08	24S	28E		583270	3567142*	2302	78	50	28
<u>C 02976</u>		C	ED	4	2	3 12	24S	27E		580519	3566195*	2616	57	27	30
<u>C 03740 POD1</u>		C	ED	4	4	4 12	24S	27E		581283	3565795	2832	340		
<u>C 03037</u>		C	ED	4	3	4 12	24S	27E		580930	3565795*	2881	116	25	91
<u>C 03260 POD2</u>	O	C	ED	1	3	3 12	24S	27E		580100	3565984	2985	80	56	24
<u>C 01731</u>		C	ED		4	2 05	24S	28E		584483	3568367*	2989	80	30	50
<u>C 03260 POD1</u>		C	ED	3	3	3 12	24S	27E		579995	3565935	3079	80	56	24
<u>C 00010 CLW191724</u>	O		ED	2	3	2 25	23S	27E		580926	3571666*	3101	259		

Average Depth to Water **44 feet**
 Minimum Depth **25 feet**
 Maximum Depth **70 feet**

Record Count: 10

UTM NAD83 Radius Search (in meters).

Easting (X): 581504

Northing (Y): 3568619

Radius: 3220

***UTM location was derived from PLSS - see Help**

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data

5/19/17 3 43 PM

WATER COLUMN/ AVERAGE DEPTH TO WATER



Hall Environmental Analysis Laboratory, Inc.

CLIENT: Permits West **Client Sample ID:** HA HA Windmill
Project: Matador RB SWD **Collection Date:** 5/16/2017 4 21 00 PM
Lab ID: 1705A11-001 **Matrix:** AQUEOUS **Received Date:** 5/18/2017 1 36 00 PM

Analyses	Result	PQL	Qual	Units	DF	Date Analyzed
EPA METHOD 300.0: ANIONS						Analyst LGT
Chloride	530	25	*	mg/L	50	5/23/2017 11 34 04 PM
EPA METHOD 1664B						Analyst SMS
N-Hexane Extractable Material	ND	10.6		mg/L	1	5/22/2017
SM2540C MOD: TOTAL DISSOLVED SOLIDS						Analyst KS
Total Dissolved Solids	3580	20.0	*	mg/L	1	5/25/2017 11 39 00 AM

Refer to the QC Summary report and sample login checklist for flagged QC data and preservation information

- | | | |
|--------------------|---|---|
| Qualifiers: | * Value exceeds Maximum Contaminant Level | B Analyte detected in the associated Method Blank |
| | D Sample Diluted Due to Matrix | E Value above quantitation range |
| | H Holding times for preparation or analysis exceeded | J Analyte detected below quantitation limits |
| | ND Not Detected at the Reporting Limit | P Sample pH Not In Range |
| | R RPD outside accepted recovery limits | RL Reporting Detection Limit |
| | S % Recovery outside of range due to dilution or matrix | W Sample container temperature is out of |



Hall Environmental Analysis Laboratory, Inc.

Analytical Report
 Lab Order 1705A11
 Date Reported 5/30/2017

CLIENT: Permits West **Client Sample ID:** Sec 18 Tank
Project: Matador RB SWD **Collection Date:** 5/16/2017 5.18.00 PM
Lab ID: 1705A11-002 **Matrix:** AQUEOUS **Received Date:** 5/18/2017 1.36 00 PM

Analyses	Result	PQL	Qual	Units	DF	Date Analyzed
EPA METHOD 300.0: ANIONS						
Chloride	460	25	*	mg/L	50	5/23/2017 11 46 29 PM
EPA METHOD 1664B						
N-Hexane Extractable Material	ND	9.59		mg/L	1	5/22/2017
SM2540C MOD: TOTAL DISSOLVED SOLIDS						
Total Dissolved Solids	2210	200	*	mg/L	1	5/25/2017 11 39 00 AM

Analyst LGT
 Analyst SMS
 Analyst KS

Refer to the QC Summary report and sample login checklist for flagged QC data and preservation information

- | | | |
|--------------------|---|---|
| Qualifiers: | * Value exceeds Maximum Contaminant Level | B Analyte detected in the associated Method Blank |
| | D Sample Diluted Due to Matrix | E Value above quantitation range |
| | H Holding times for preparation or analysis exceeded | J Analyte detected below quantitation limits |
| | ND Not Detected at the Reporting Limit | P Sample pH Not In Range |
| | R RPD outside accepted recovery limits | RL Reporting Detection Limit |
| | S % Recovery outside of range due to dilution or matrix | W Sample container temperature is out of |



QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

WO# 1705A11
30-May-17

Client: Permits West
Project: Matador RB SWD

Sample ID	MB-31875	SampType	MBLK	TestCode	EPA Method 1664B					
Client ID	PBW	Batch ID	31875	RunNo	42988					
Prep Date	5/22/2017	Analysis Date	5/22/2017	SeqNo	1353700	Units	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
N-Hexane Extractable Material	ND	10.0								

Sample ID	LCS-31875	SampType	LCS	TestCode	EPA Method 1664B					
Client ID	LCSW	Batch ID	31875	RunNo	42988					
Prep Date	5/22/2017	Analysis Date	5/22/2017	SeqNo	1353701	Units	mg/L			
Analyte	Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
N-Hexane Extractable Material	35.2	10.0	40.00	0	88.0	78	114			

Qualifiers:

- * Value exceeds Maximum Contaminant Level
- D Sample Diluted Due to Matrix
- H Holding times for preparation or analysis exceeded
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S % Recovery outside of range due to dilution or matrix
- B Analyte detected in the associated Method Blank
- E Value above quantitation range
- J Analyte detected below quantitation limits
- P Sample pH Not In Range
- RL Reporting Detection Limit
- W Sample container temperature is out of limit as specified



QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

WO# 1705A11

30-May-17

Client: Permits West
Project: Matador RB SWD

Sample ID	MB	SampType	MBLK	TestCode	EPA Method 300.0 Anions						
Client ID	PBW	Batch ID	R43029	RunNo	43029						
Prep Date		Analysis Date	5/23/2017	SeqNo	1354221	Units	mg/L				
Analyte		Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Chloride		ND	0.50								

Sample ID	LCS	SampType	LCS	TestCode	EPA Method 300.0: Anions						
Client ID	LCSW	Batch ID	R43029	RunNo	43029						
Prep Date		Analysis Date	5/23/2017	SeqNo	1354222	Units	mg/L				
Analyte		Result	PQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	%RPD	RPDLimit	Qual
Chloride		4.7	0.50	5.000	0	94.0	90	110			

Qualifiers:

- * Value exceeds Maximum Contaminant Level
- D Sample Diluted Due to Matrix
- H Holding times for preparation or analysis exceeded
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S % Recovery outside of range due to dilution or matrix
- B Analyte detected in the associated Method Blank
- E Value above quantitation range
- J Analyte detected below quantitation limits
- P Sample pH Not In Range
- RL Reporting Detection Limit
- W Sample container temperature is out of limit as specified



QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

WO# 1705A11

30-May-17

Client: Permits West
Project: Matador RB SWD

Sample ID: MB-31907	SampType MBLK	TestCode SM2540C MOD: Total Dissolved Solids
Client ID PBW	Batch ID 31907	RunNo 43060
Prep Date 5/23/2017	Analysis Date 5/25/2017	SeqNo 1355285 Units mg/L
Analyte	Result	PQL SPK value SPK Ref Val %REC LowLimit HighLimit %RPD RPDLimit Qual
Total Dissolved Solids	ND	20 0

Sample ID LCS-31907	SampType LCS	TestCode SM2540C MOD Total Dissolved Solids
Client ID LCSW	Batch ID 31907	RunNo 43060
Prep Date 5/23/2017	Analysis Date 5/25/2017	SeqNo 1355286 Units mg/L
Analyte	Result	PQL SPK value SPK Ref Val %REC LowLimit HighLimit %RPD RPDLimit Qual
Total Dissolved Solids	1030	20 0 1000 0 103 80 120

Qualifiers:

- * Value exceeds Maximum Contaminant Level
- D Sample Diluted Due to Matrix
- H Holding times for preparation or analysis exceeded
- ND Not Detected at the Reporting Limit
- R RPD outside accepted recovery limits
- S % Recovery outside of range due to dilution or matrix
- B Analyte detected in the associated Method Blank
- E Value above quantitation range
- J Analyte detected below quantitation limits
- P Sample pH Not In Range
- RL Reporting Detection Limit
- W Sample container temperature is out of limit as specified



Black River Water Management Company, LLC

One Lincoln Centre • 5400 LBJ Freeway • Suite 1500 • Dallas, Texas 75240

Voice 972.371.5454 • Fax 214.866.4832

ccollier@matadorresources.com

Clark Collier
Senior Geologist

May 11, 2017

New Mexico Oil Conservation Division
1220 South St. Francis Drive
Santa Fe, New Mexico 87505
David.Catanach@state.nm.us

Re: Geology Statement
Rustler Breaks SWD #2 ("the Well")
Section 6, Township 24 South, Range 28 East, N.M.P.M.
Eddy County, New Mexico

To whom it may concern:

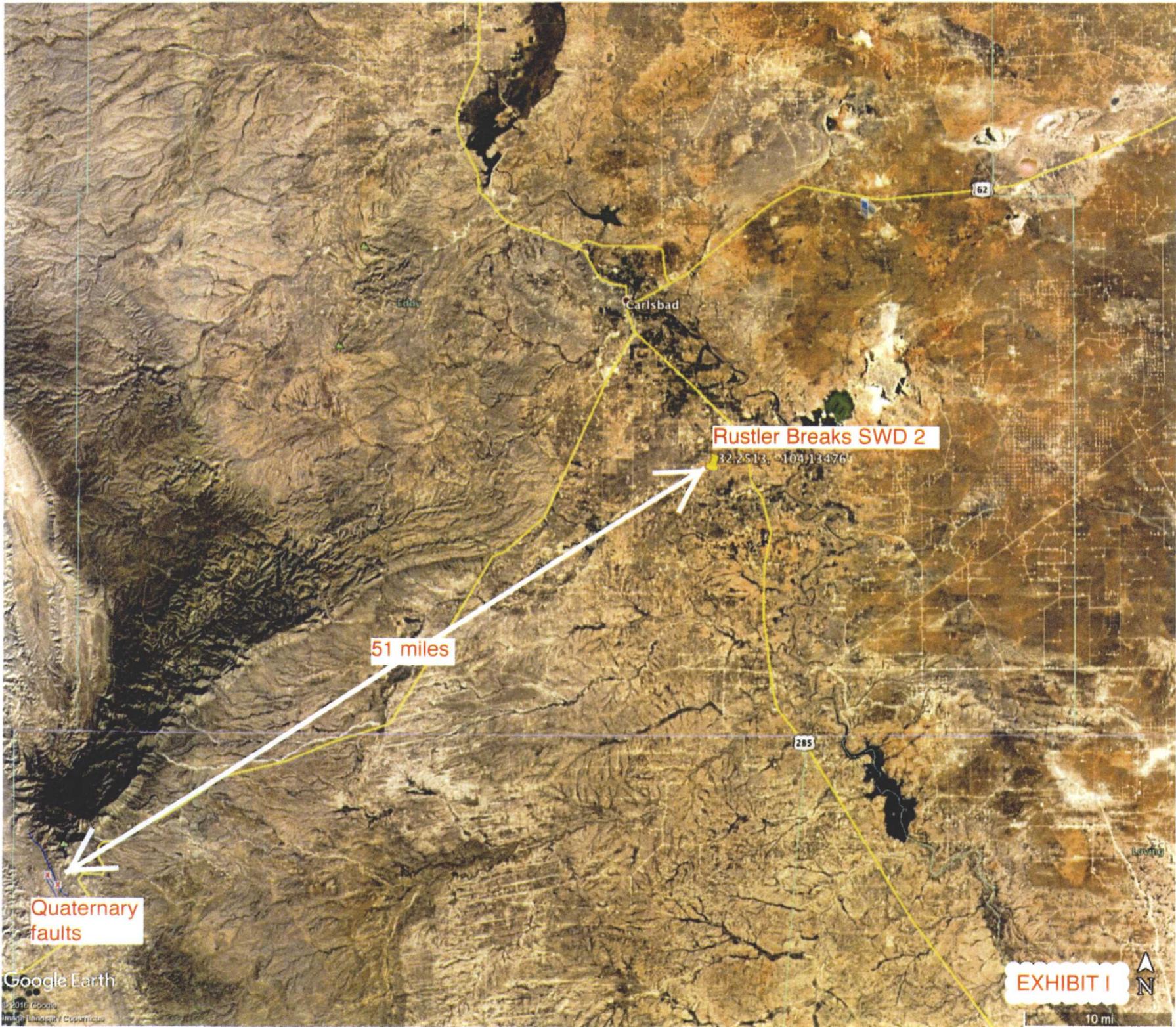
Available geologic and engineering data related to the proposed Well has been thoroughly reviewed, and no evidence for a hydrological connection between the proposed deep Devonian injection zone, located at approximately 13,694', and any underground sources of drinking water has been found.

Sincerely,
Black River Water Management
Company, LLC

Clark Collier



EXHIBIT I



Rustler Breaks SWD 2

32.2513, -104.13476

51 miles

Quaternary faults

EXHIBIT I



10 mi

Affidavit of Publication

State of New Mexico,
County of Eddy, ss.

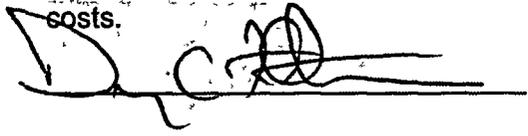
Danny Fletcher, being first duly
sworn, on oath says:

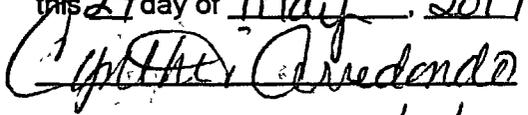
That he is the Publisher of the
Carlsbad Current-Argus, a
newspaper published daily at the
City of Carlsbad, in said county of
Eddy, state of New Mexico and of
general paid circulation in said
county; that the same is a duly
qualified newspaper under the laws
of the State wherein legal notices
and advertisements may be
published; that the printed notice
attached hereto was published in the
regular and entire edition of said
newspaper and not in supplement
thereof on the date as follows, to wit:

May 23, 2017
Black River Water
Management Compa-
ny, LLC is applying to
drill the Rustler Breaks
SWD 2 as a saltwater
disposal well. The well
is staked at 1064 FNL
& 230 FWL Sec. 6, T
24 S, R. 28 E, Eddy
County and is 3 miles
southwest of Loving,
NM. Disposal will be in
the Devonian from
13,700' to 14,700'.
Maximum injection
pressure will be 2,740
psi. Maximum dispos-
al rate will be 40,000
bwpd. Interested par-
ties must file objec-
tions or requests for
hearing with the NM
Oil Conservation Divi-
sion, 1220 South Saint
Francis Dr., Santa Fe,
NM 87505 within 15
days. Additional infor-
mation can be ob-
tained by contacting
Brian Wood, Permits
West, Inc., 37 Verano
Loop, Santa Fe, NM
87508. Phone number
is (505) 466-8120.

May 23 2017

That the cost of publication is \$51.48
and that payment thereof has been
made and will be assessed as court
costs.



Subscribed and sworn to before me
this 24 day of May, 2017


My commission Expires 2/13/21

Notary Public

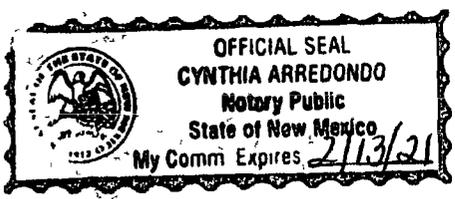


EXHIBIT J

PERMITS WEST, INC

PROVIDING PERMITS for LAND USERS

37 Verano Loop Santa Fe, New Mexico 87508 (505) 466-8120

June 6, 2017

Vickie Connally
R211 Ash Road
Loving, NM 88256

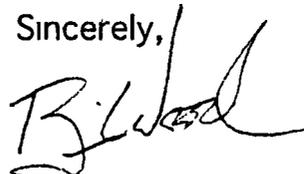
Black River Water Management Company, LLC is applying (see attached application) to drill the Rustler Breaks SWD 2 well as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposed saltwater disposal well. This letter is a notice only. No action is needed unless you have questions or objections.

Well Name: Rustler Breaks SWD 2 (fee lease) ID = 14,700'
Proposed Disposal Zone: Devonian (from 13,700' to 14,700')
Location: 1064' FNL & 230' FWL Sec. 6, T. 24 S., R. 28 E., Eddy County, NM
Approximate Location: ≈3 miles southwest of Loving, NM
Applicant Name: Black River Water Management Company, LLC (972) 371-5420
Applicant's Address: 5400 LBJ Freeway, Suite 1500, Dallas TX 75240

Submittal Information: Application for a saltwater disposal well will be filed with the NMOCD. If you have an objection, or wish to request a hearing, then it must be filed with the NMOCD within 15 days of receipt of this letter. NMOCD address is 1220 South St. Francis Dr. Santa Fe, NM 87505. Phone is (505) 476-3440.

Please call me if you have any questions.

Sincerely,



Brian Wood

EXHIBIT K

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **MARBOB C/O COG OPERATING**
600 W. ILLINOIS AVE.
MIDLAND TX 79706

Street and Apt. No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PECOS NM JUN - 8 2017 87552-9998

US Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service
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Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$ **11.71**

Total Postage and Fees \$ **1.61**

Sent To **DEVON ENERGY PRODUCTION**
COMPANY LP
PO BOX 108838
OKLAHOMA CITY, OK 73101-8838

Street and Apt. No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PECOS NM JUN - 8 2017 87552-9998

US Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **EOG Y RESOURCES**
105 S. 4TH ST.
ARTESIA NM 88210

Street and Apt. No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PECOS NM JUN - 8 2017 87552-9998

US Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **CHEVRON USA INC**
6301 DEAUVILLE BLVD
MIDLAND TX 79706

Street and Apt. No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PECOS NM JUN - 8 2017 87552-9998

US Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **NMSLO**
PO BOX 1148
SANTA FE NM 87504

Street and Apt. No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PECOS NM JUN - 8 2017 87552-9998

US Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **NADEL AND GUSSMAN LLC**
601 N MARIENFELD
MIDLAND TX 79701

Street and Apt. No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PECOS NM JUN - 8 2017 87552-9998

US Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

EXHIBIT K

7015 1660 0000 1583 2016

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Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

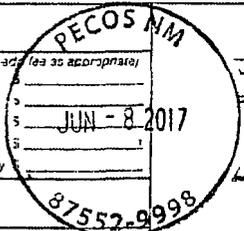
Total Postage and Fees **OGX RESOURCES LLC**
PO BOX 2064

Sent To **MIDLAND TX 79702**

Street and Apt No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9077 See Reverse for Instructions



7015 1660 0000 1583 2102

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

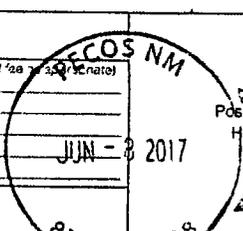
Total Postage and Fees **BLM**
620 E. GREENE

Sent To **CARLSBAD NM 88220**

Street and Apt No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9077 See Reverse for Instructions



7015 1660 0000 1583 2025

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

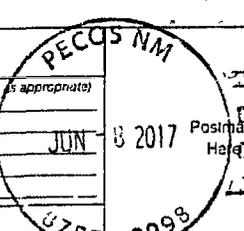
Total Postage and Fees **MEWBOURNE OIL COMPANY**
PO BOX 7698

Sent To **TYLER TX 75711**

Street and Apt No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9077 See Reverse for Instructions



7015 1660 0000 1583 2022

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

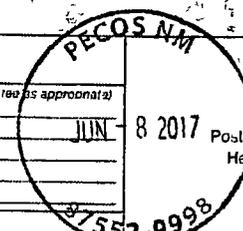
Total Postage and Fees **VICKIE CONNALLY**
R211 ASH RD

Sent To **LOVING NM 88256**

Street and Apt No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9077 See Reverse for Instructions



7015 1660 0000 1583 2041

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

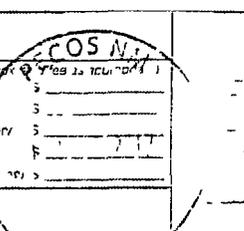
Total Postage and Fees **FEATHERSTONE DEVELOPMENT**
CORPORATION

Sent To **PO BOX 429**
ROS WELL NM 88202

Street and Apt No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9077 See Reverse for Instructions



7015 1660 0000 1583 2058

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees **MARBOB ENERGY CORPORATION**
PO DRAWER 227

Sent To **ARTESIA NM 88211**

Street and Apt No. or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9077 See Reverse for Instructions

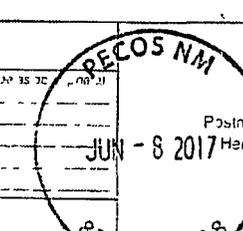


EXHIBIT K

7015 1660 0000 1583 2034

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add to certified mail fee)

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **ARTESIA NM 88211-0300**

Street and Apt No., or PO Box No. **Matador Rustler Breaks SWD**

City, State, ZIP+4®

PS Form 3800, April 2015 Edition PSN 7530-02-000-9050 See reverse for instructions

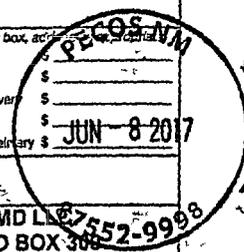


EXHIBIT K

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece, or on the front if space permits

1 Article Addressed to

BLM
620 E GREENE
CARLSBAD NM 88220

Matador-Rustler Breaks SWD

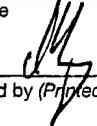
9590 9402 2353 6225 9359 06

2 Article Number (Transfer from envelope label)

7015 1660 0000 1583 2102

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Address

X 

B Received by (Printed Name) C Date of Delivery

6/12/17

D Is delivery address different from item 1? Yes No
If YES, enter delivery address below

3 Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restr. Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation
 Collect on Delivery Signature Confirmation Restricted Delivery
 Delivery Restricted Delivery Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece, or on the front if space permits

1 Article Addressed to

CHEVRON USA INC
6301 DEAUVILLE BLVD
MIDLAND TX 79706

Matador-Rustler Breaks SWD

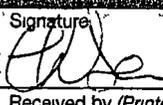
9590 9402 2353 6225 9358 76

2 Article Number (Transfer from envelope label)

7015 1660 0000 1583 2133

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Address

X 

B Received by (Printed Name) C Date of Delivery

C. Lawrence 6/12/17

D Is delivery address different from item 1? Yes No
If YES, enter delivery address below

3 Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restr. Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation
 Collect on Delivery Signature Confirmation Restricted Delivery
 Delivery Restricted Delivery Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece, or on the front if space permits

1 Article Addressed to

DEVON ENERGY PRODUCTION COMPANY LP
PO BOX 108838
OKLAHOMA CITY OK 73101-8838

Matador-Rustler Breaks SWD

9590 9402 2353 6225 9359 82

2 Article Number (Transfer from envelope label)

7015 1660 0000 1583 2027

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Address

X 

B Received by (Printed Name) C Date of Delivery

6/12/17

D Is delivery address different from item 1? Yes No
If YES, enter delivery address below

3 Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restr. Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation
 Collect on Delivery Signature Confirmation Restricted Delivery
 Delivery Restricted Delivery Restricted Delivery (over \$500)

PS Form 3811 July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3 Print your name and address on the reverse so that we can return the card to you Attach this card to the back of the mailpiece, or on the front if space permits 	<p>A. Signature <input checked="" type="checkbox"/> <i>Audra (Dell)</i> <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) <i>A. WATTS</i></p> <p>C. Date of Delivery</p>	
<p>1 Article Addressed to</p> <p>DMD LLC PO BOX 300 ARTESIA NM 88211-0300</p> <p>Matador-Rustler Breaks SWD</p> <p>9590 9402 2353 6225 9359 75</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below <input type="checkbox"/> No</p>	
<p>2 Article Number (Transfer from service label)</p> <p>7015 1660 0000 1583 2034</p>	<p>3 Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3 Print your name and address on the reverse so that we can return the card to you Attach this card to the back of the mailpiece, or on the front if space permits 	<p>A. Signature <input checked="" type="checkbox"/> <i>BOA</i> <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) <i>BOA</i></p> <p>C. Date of Delivery <i>6/12/17</i></p>	
<p>1 Article Addressed to</p> <p>EOG Y RESOURCES 105 S 4TH ST ARTESIA NM 88210</p> <p>Matador-Rustler Breaks SWD</p> <p>9590 9402 2353 6225 9358 83</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below <input type="checkbox"/> No</p>	
<p>2 Article Number (Transfer from service label)</p> <p>7015 1660 0000 1583 2126</p>	<p>3 Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3 Print your name and address on the reverse so that we can return the card to you Attach this card to the back of the mailpiece, or on the front if space permits 	<p>A. Signature <input checked="" type="checkbox"/> <i>Janine Kurnick</i> <input type="checkbox"/> Agent <input type="checkbox"/> Address</p> <p>B. Received by (Printed Name) <i>Janine Kurnick</i></p> <p>C. Date of Delivery <i>6-2-17</i></p>	
<p>1 Article Addressed to</p> <p>FEATHERSTONE DEVELOPMENT CORPORATION P O BOX 429 ROSWELL NM 88202</p> <p>Matador-Rustler Breaks SWD</p> <p>9590 9402 2353 6225 9359 68</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below <input type="checkbox"/> No</p>	
<p>2 Article Number (Transfer from service label)</p> <p>7015 1660 0000 1583 2041</p>	<p>3 Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece, or on the front if space permits

1 Article Addressed to

MARBOB C/O COG OPERATING
600 W ILLINOIS AVE
MIDLAND TX 79706

Matador-Rustler Breaks SWD

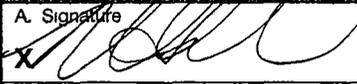
9590 9402 2353 6225 9358 69

2 Article Number (Transfer from service label)

7015 1660 0000 1583 2140

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Address

B Received by (Printed Name) Date of Delivery
Mike Goodwin

D Is delivery address different from item 1? Yes
If YES, enter delivery address below No

3 Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restrict Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery

Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece, or on the front if space permits

1 Article Addressed to

MEWBOURNE OIL COMPANY
PO BOX 7698
TYLER TX 75711

Matador-Rustler Breaks SWD

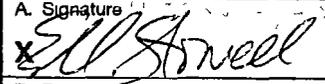
9590 9402 2353 6225 9359 44

2 Article Number (Transfer from service label)

7015 1660 0000 1583 205

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Address

B Received by (Printed Name) Date of Delivery
Eric M Stowell 6/13/17

D Is delivery address different from item 1? Yes
If YES, enter delivery address below No

3 Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restrict Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery

Restricted Delivery (over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece, or on the front if space permits

1 Article Addressed to

NADEL AND GUSSMAN LLC
601 N MARIENFELD
MIDLAND TX 79701

Matador-Rustler Breaks SWD

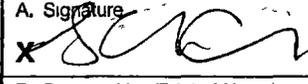
9590 9402 2353 6225 9359 20

2 Article Number (Transfer from service label)

7015 1660 0000 1583 2089

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Address

B Received by (Printed Name) Date of Delivery
S Chantonn 10-13-17

D Is delivery address different from item 1? Yes
If YES, enter delivery address below No

3 Service Type Priority Mail Express®
 Adult Signature Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restrict Delivery
 Certified Mail® Return Receipt for Merchandise
 Certified Mail Restricted Delivery Signature Confirmation
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery

Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3
- Print your name and address on the reverse so that we can return the card to you
- Attach this card to the back of the mailpiece, or on the front if space permits.

1 Article Addressed to

NMSLO
PO BOX 1148
SANTA FE NM 87504

Matador-Rustler Breaks SWD

9590 9402 2353 6225 9358 90

2 Article Number (Transfer from service label)

7015 1660 0000 1583 2119

COMPLETE THIS SECTION ON DELIVERY

A Signature *[Signature]* Agent
 Addressee

B Received by (Printed Name) C Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below. No

JUN 14 2017

- 3 Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery



New Mexico Office of the State Engineer

Water Column/Average Depth to Water

(A CLW##### in the POD suffix indicates the POD has been replaced & no longer serves a water right file)

(R=POD has been replaced,
O=orphaned,
C=the file is closed)

(quarters are 1=NW 2=NE 3=SW 4=SE)
(quarters are smallest to largest)

(NAD83 UTM in meters)

(In feet)

POD Number	Code	Sub-basin	County	Q Q Q	64 16 4	Sec	Tws	Rng	X	Y	DepthWell	DepthWater	Water Column
<u>C 01244</u>	C	ED		4 4 06	24S	28E	582860	3567543*			109	70	39
												Average Depth to Water	70 feet
												Minimum Depth	70 feet
												Maximum Depth	70 feet

Record Count. 1

PLSS Search:

Section(s) 6 Township 24S Range. 28E

*UTM location was derived from PLSS - see Help

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.

6/30/17 9 00 AM

WATER COLUMN/ AVERAGE DEPTH TO WATER



C-108 Review Checklist: Received 6/21/2017 Add Request _____ Reply Date _____ Suspended _____ [Ver 15]

ORDER TYPE WFX / PMX / SWD Number _____ Order Date _____ Legacy Permits/Orders _____

Well No 2 Well Name(s) RUSTLER BREAKS SWD

API 30-0 15-44240 Spud Date TBN New or Old N (UIC Class II Primacy 03/07/1982)

Footages 1064 FNL
230 FUL Lot 4 or Unit _____ Sec 6 Tsp 24S Rge 28E County Eddy

General Location 23 miles NW Malaga Pool _____ Pool No _____

BLM 100K Map _____ Operator BLACK RIVER WATER MANAGEMENT LLC OGRID 371287 Contact Brian Wood's Agent

COMPLIANCE RULE 59 Total Wells 2 Inactive 0 Fincl Assur OK Compl Order? MA IS 59 OK? Y Date 7-07-2017

WELL FILE REVIEWED Current Status Proposed

WELL DIAGRAMS NEW Proposed or RE-ENTER Before Conv After Conv Logs in Imaging MA

Planned Rehab Work to Well _____

Well Construction Details		Sizes (in) Borehole / Pipe	Setting Depths (ft)	Cement Sx or Cf	Cement Top and Determination Method	
Planned ___ or Existing ___ Surface		<u>24/20</u>	<u>550</u>	Stage Tool	<u>1400</u>	<u>SURFACE/VISUAL</u>
Planned ___ or Existing ___ Interm/Prod		<u>18 3/4 / 16</u>	<u>2500</u>		<u>2000</u>	<u>SURFACE/VISUAL</u>
Planned ___ or Existing ___ Interm/Prod		<u>14 3/4 / 10 3/4</u>	<u>9350 13700</u>		<u>2150</u>	
Planned ___ or Existing ___ Prod/Liner		<u>9 1/2 / 7 5/8</u>	<u>13670</u>		<u>900</u>	<u>7500/CB-L</u>
Planned ___ or Existing ___ Liner						
Planned ___ or Existing <input checked="" type="radio"/> (OH) PERF		<u>13700/14700</u>		Inj Length <u>1000'</u>		

Injection Lithostratigraphic Units				Depths (ft)	Injection or Confining Units	Tops	Completion/Operation Details	
Adjacent Unit	Litho	Struc	Por		<u>WD</u>	<u>13593</u>	Drilled TD	<u>14770</u> PBTD _____
Confining Unit	Litho	Struc	Por		<u>DV</u>	<u>3668</u>	NEW TD	_____ NEW PBTD _____
Proposed Inj Interval TOP							NEW Open Hole	<input type="radio"/> or NEW Perfs <input checked="" type="radio"/>
Proposed Inj Interval BOTTOM							Tubing Size	<u>4 1/2</u> in Inter Coated? _____
Confining Unit	Litho	Struc	Por				Proposed Packer Depth	<u>13620</u> ft
Adjacent Unit	Litho	Struc	Por				Min Packer Depth	<u>130'</u> (100-ft limit)
							Proposed Max Surface Press	<u>2740</u> psi
							Admin Inj Press	<u>2740</u> (0.2 psi per ft)

AOR Hydrologic and Geologic Information

POTASH R-111-P MY Noticed? _____ BLM Sec Ord WIPP Noticed? _____ Salt/Salado T8M B 2405 NW Cliff House fm _____

FRESH WATER Aquifer Quaternary Max Depth 90 HYDRO AFFIRM STATEMENT By Qualified Person

NMOSE Basin CARLSBAD CAPITAN REEF thru adj NA No Wells within 1-Mile Radius? 0 FW Analysis X

Disposal Fluid Formation Source(s) Bone Spring WOLF CREEK Analysis? Y On Lease Operator Only or Commercial

Disposal Int Inject Rate (Avg/Max BWPD) 304/40K Protectable Waters? _____ Source _____ System Closed or Open

HC Potential Producing Interval? N/A Formerly Producing? N/A Method Logs/DST/P&A/Other _____ 2-Mile Radius Pool Map

AOR Wells 1/2-M Radius Map? _____ Well List? _____ Total No Wells Penetrating Interval _____ Horizontals? _____

Penetrating Wells No Active Wells 0 Num Repairs? _____ on which well(s)? _____ Diagrams? _____

Penetrating Wells: No P&A Wells 0 Num Repairs? _____ on which well(s)? _____ Diagrams? Y

NOTICE Newspaper Date MA 23 2017 Mineral Owner [Redacted] Surface Owner BLM N Date 6-12-2017

RULE 26 7(A) Identified Tracts? _____ Affected Persons MA, L & Gussman An, Mewbourne, Featherston N Date 6-12-2017

Order Conditions: Issues C-B-L From top liner to bottom liner