

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

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

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DBEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-015-44001
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other SALT WATER DISPOSAL.		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator SOLARIS WATER MIDSTREAM, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 9811 KATY FWY, SUITE 900 HOUSTON TEXAS 77024		7. Lease Name or Unit Agreement Name SOLARIS EDDY STATE
4. Well Location Unit Letter <u>K</u> : 2267 feet from the <u>SOUTH</u> line and <u>2469</u> feet from the <u>WEST</u> line Section <u>2</u> Township <u>26S</u> Range <u>29E</u> NMPM County <u>EDDY</u>		8. Well Number <u>2</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3022 GR		9. OGRID Number 371643
		10. Pool name or Wildcat SWD; DEVONIAN

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

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

Due to leaking 7 5/8" liner top, ran 13 joints of 7 5/8", 39.00#, P-110, STL Flush Joint stub liner, stung into 7 5/8" liner top at 9,309' and O-Tex Energy Services cemented stub liner with 75 sacks of Class II containing .35% retarder + .05% fluid loss + .2% friction reducer (mixing II20 4.30 gals/sack, yield 1.06 cubic feet/sack, weight 16.4#/gallon). Cementing operations completed 11/11/2017 @ 4:45 PM CDT. New top of 7 5/8" liner @ 8,723' and bottom of liner remains @ 13,935' KB measurement. WOC 26 hours and pressure tested 7 5/8" stub liner to 1,000# for 30 minutes successfully with 16.3#/gallon mud.

Spud Date: 04/22/2017 Rig Release Date:

**NM OIL CONSERVATION**  
 ARTESIA DISTRICT  
 NOV 20 2017

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

RECEIVED

SIGNATURE Teena Robbins TITLE Office Manager DATE 11/14/2017

Type or print name Teena Robbins E-mail address: teena.robbs@solarismidstream.com PHONE: 432-203-9024  
 For State Use Only

APPROVED BY: [Signature] TITLE Staff Mgr DATE 11-21-17  
 Conditions of Approval (if any):