

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 DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | WELL API NO. 30-025-43452 |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator Riley Permian Operating Company | | 6. State Oil & Gas Lease No. VB-2643-0001 |
| 3. Address of Operator 29 E. Reno Ave., Suite 500, Oklahoma City, OK 73104 | | 7. Lease Name or Unit Agreement Name K2 18 State |
| 4. Well Location Unit Letter <u>P</u> : <u>120</u> feet from the <u>South</u> line and <u>440</u> feet from the <u>East</u> line Section <u>18</u> Township <u>9 S</u> Range <u>33 E</u> NMPM <u>Lea</u> County | | 8. Well Number <u>1H</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4391' GL | | 9. OGRID Number <u>372290</u> |
| | | 10. Pool name or Wildcat Flying M; San Andres |

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

| | | | |
|--|---|---|--|
| 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: <input type="checkbox"/> | | OTHER: Temporarily Abandon Well <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

12/11/19 - MIRU PU. ND WH. NU BOP. TOH and LD 1 jt tubing. MI WLU. TIH w/7" CIBP. Set CIBP @ 3705'.
 Test casing to 680 psi for 15 min. Good test. Dump bail 6 sx (39') Class C cement on top of CIBP. RDMO.
 12/13/19 - Run MIT. Pressure casing to 600 psi and chart for 32 min. Passed MIT. Test witnessed by NMOCD.

FINAL TA STATUS- EXTENSION

Approval of TA EXPIRES: 12/13/24
 Well needs to be PLUGGED OR RETURNED
 to PRODUCTION
 BY THE DATE STATED ABOVE: X7

Spud Date:

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

SIGNATURE *Alan Tiedeman* TITLE Production Manager DATE 12/18/19

Type or print name Alan Tiedeman E-mail address: alantiedeman@rileypermian.com PHONE: 405-415-8693

For State Use Only

APPROVED BY: *Kenny Fort* TITLE C.O A DATE 12-20-19

Conditions of Approval (if any):

District 1
 1625 N. French Dr., Hobbs, NM 88240
 Phone (575) 393-6161 Fax: (575) 393-0720

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

| | |
|---|--|
| RILEY PERMIAN OPERATING COMPANY, LLC | Operator Name 30-025-43452-00-00 |
| K2 18 STATE | Property Name 001H Well No. |

7. Surface Location

| | | | | | | | | |
|----------------------|----------------------|------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|
| UL - Lot P | Section 18 | Township 9-S | Range 33-E | Feet from 120 | N/S Line S | Feet From 440 | E/W Line E | County LEA |
|----------------------|----------------------|------------------------|----------------------|-------------------------|----------------------|-------------------------|----------------------|----------------------|

Well Status

| | | | | |
|---|--|---------------------|--|-------------------------|
| TA'D Well <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO | SHUT-IN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | INJECTOR INJ SWD | PRODUCER <input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS | DATE 12/13/19 |
|---|--|---------------------|--|-------------------------|

OBSERVED DATA

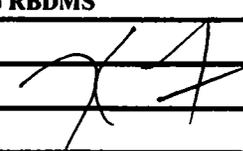
| | (A)Surf-Interm | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing |
|-----------------------------|----------------|--------------|--------------|-------------|--------------------|
| Pressure | 0 | NA | NA | 0 | TA |
| Flow Characteristics | | | | | |
| Puff | Y/N | Y/N | Y/N | Y/N | CO2 _____ |
| Steady Flow | Y/N | Y/N | Y/N | Y/N | WTR _____ |
| Surges | Y/N | Y/N | Y/N | Y/N | GAS _____ |
| Down to nothing | Y/N | Y/N | Y/N | Y/N | If applicable type |
| Gas or Oil | Y/N | Y/N | Y/N | Y/N | fluid injected for |
| Water | Y/N | Y/N | Y/N | Y/N | Waterflood |

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

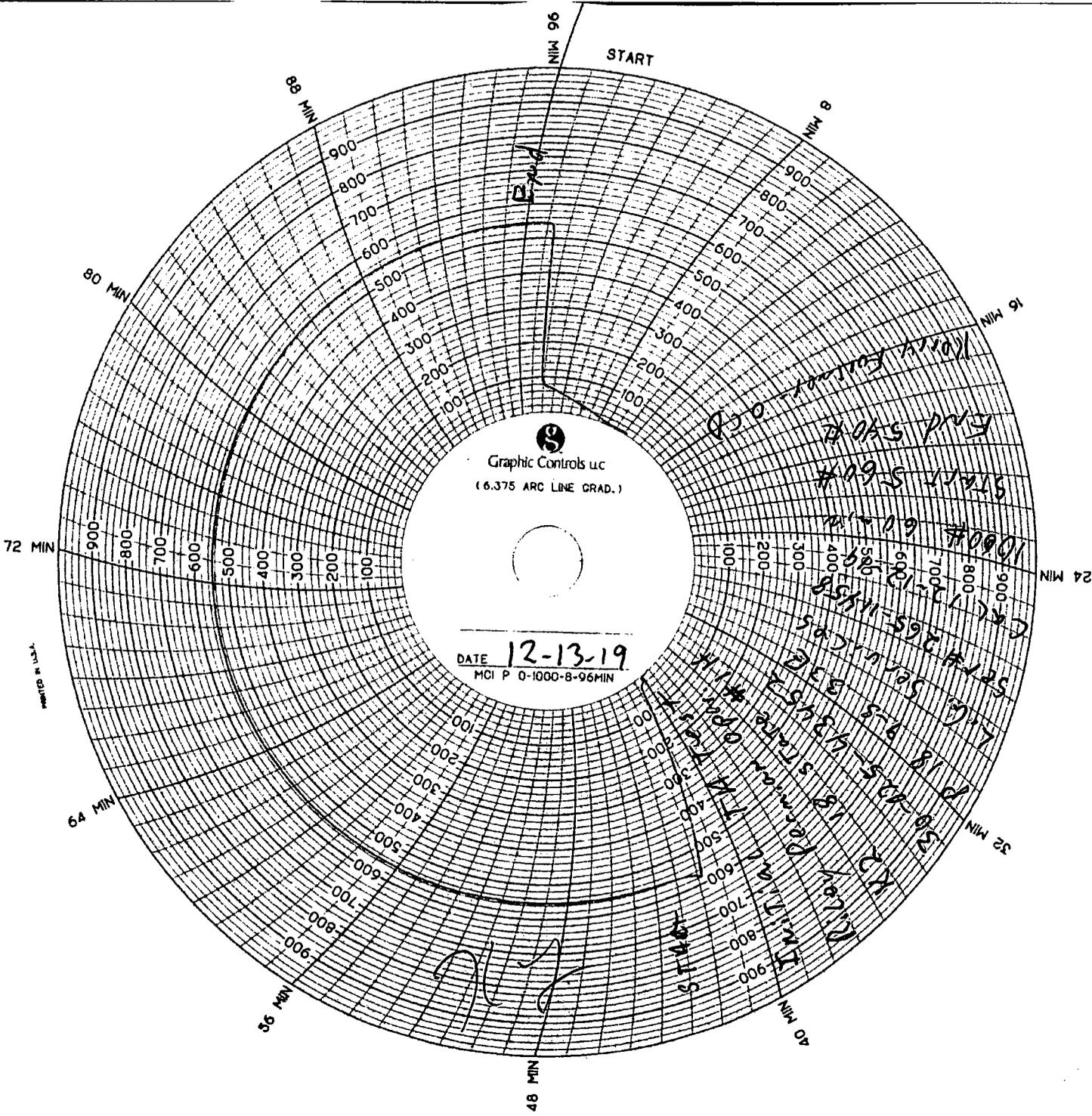
Post workover MIT TA STATUS Initial Test

L.G. Services
ser # 265-11458
cal 12-12-19

57560# E

| | |
|-----------------------------------|---|
| Signature: | OIL CONSERVATION DIVISION |
| Printed name: | Entered into RBDMS |
| Title: | Re-test |
| E-mail Address: |  |
| Date: 12/13/19 | Phone: |
| Witness: KERRY FORTNER-OCD | |

575-399-3221



Graphic Controls Inc.
 (6.375 ARC LINE GRAD.)

DATE 12-13-19
 MCI P 0-1000-8-96MIN

MADE IN U.S.A.

START

72 MIN

80 MIN

88 MIN

96 MIN

8 MIN

16 MIN

24 MIN

32 MIN

40 MIN

48 MIN

56 MIN

64 MIN

Handwritten notes:
 KORSA
 END 5:40
 START 5:00
 12-13-19
 58-59
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 71-72
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