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|---|---|---|---|-----------------------------|-----------------------|--------------------------------|--|---|--|---------------------------------------|--|--|--|---|---|---|--|--|--------------|--|--|--|
| 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 Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 District IV 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462 | 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 301188 WELL API NUMBER 30-015-47969 5. Indicate Type of Lease F 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name GOONCH FEDERAL COM 04 | | | | | | | | | | | | | | | | | | | | |
| 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.) | | | | | | | | | | | | | | | | | | | | | | |
| 1. Type of Well: G | | 8. Well Number 225H | | | | | | | | | | | | | | | | | | | | |
| 2. Name of Operator NOVO OIL & GAS NORTHERN DELAWARE, LLC | | 9. OGRID Number 372920 | | | | | | | | | | | | | | | | | | | | |
| 3. Address of Operator 1001 West Wilshire Blvd, Suite 206, Oklahoma City, OK 73116 | | 10. Pool name or Wildcat | | | | | | | | | | | | | | | | | | | | |
| 4. Well Location Unit Letter <u>2</u> : <u>370</u> feet from the <u>N</u> line and feet <u>1317</u> from the <u>E</u> line Section <u>4</u> Township <u>23S</u> Range <u>28E</u> NMPM County <u>Eddy</u> | | | | | | | | | | | | | | | | | | | | | | |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.) 3035 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" style="text-align: center;">NOTICE OF INTENTION TO:</td> <td colspan="2" style="text-align: center;">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. 5/5/2021 Spudded well. 5/5/2021 spud w/spudder rig Valor 247. 6/7/2021 Rig up for big rig Precision 596. | | | | | | | | | | | | | | | | | | | | | | |
| 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"/> . | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%;"> <tr> <td>SIGNATURE</td> <td>Electronically Signed _____</td> <td>TITLE</td> <td>Chief Operating Officer _____</td> <td>DATE</td> <td>9/16/2021 _____</td> </tr> <tr> <td>Type or print name</td> <td>Kurt Shipley _____</td> <td>E-mail address</td> <td>kshipley@novoog.com _____</td> <td>Telephone No.</td> <td>405-286-3916 _____</td> </tr> </table> | | | SIGNATURE | Electronically Signed _____ | TITLE | Chief Operating Officer _____ | DATE | 9/16/2021 _____ | Type or print name | Kurt Shipley _____ | E-mail address | kshipley@novoog.com _____ | Telephone No. | 405-286-3916 _____ | | | | | | | | |
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| For State Use Only: <table style="width: 100%;"> <tr> <td>APPROVED BY:</td> <td>Kurt Simmons _____</td> <td>TITLE</td> <td>Petroleum Specialist - A _____</td> <td>DATE</td> <td>9/17/2021 _____</td> </tr> </table> | | | APPROVED BY: | Kurt Simmons _____ | TITLE | Petroleum Specialist - A _____ | DATE | 9/17/2021 _____ | | | | | | | | | | | | | | |
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