

Submit a 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

WELL API NO. 30-025-04321
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Eunice Monument South Unit
8. Well Number 104
9. OGRID Number 330679
10. Pool name or Wildcat Eunice Monument; Grayburg – San Andres

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: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other - Injector	
2. Name of Operator Empire Petroleum Corporation	
3. Address of Operator 2200 S. Utica Place, Suite 150, Tulsa, Ok 74114	
4. Well Location Unit Letter <u>C</u> : <u>660</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>25</u> Township <u>20S</u> Range <u>36E</u> NMPM County Lea	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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

NOTICE OF INTENTION TO: 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"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input checked="" type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input 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.

- Unset packer.
- Tested backside – tested good.
- RIH w/ bit and scraper and cleaned to PBTD. POOH.
- RIH w/ pkr and pump out plug.
- Circulated packer fluid in the casing-tubing annulus.
- Performed MIT – held.
- Notified NMOCD and submitted MIT.
- Return well to injection.

Spud Date:

Rig Release Date:

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

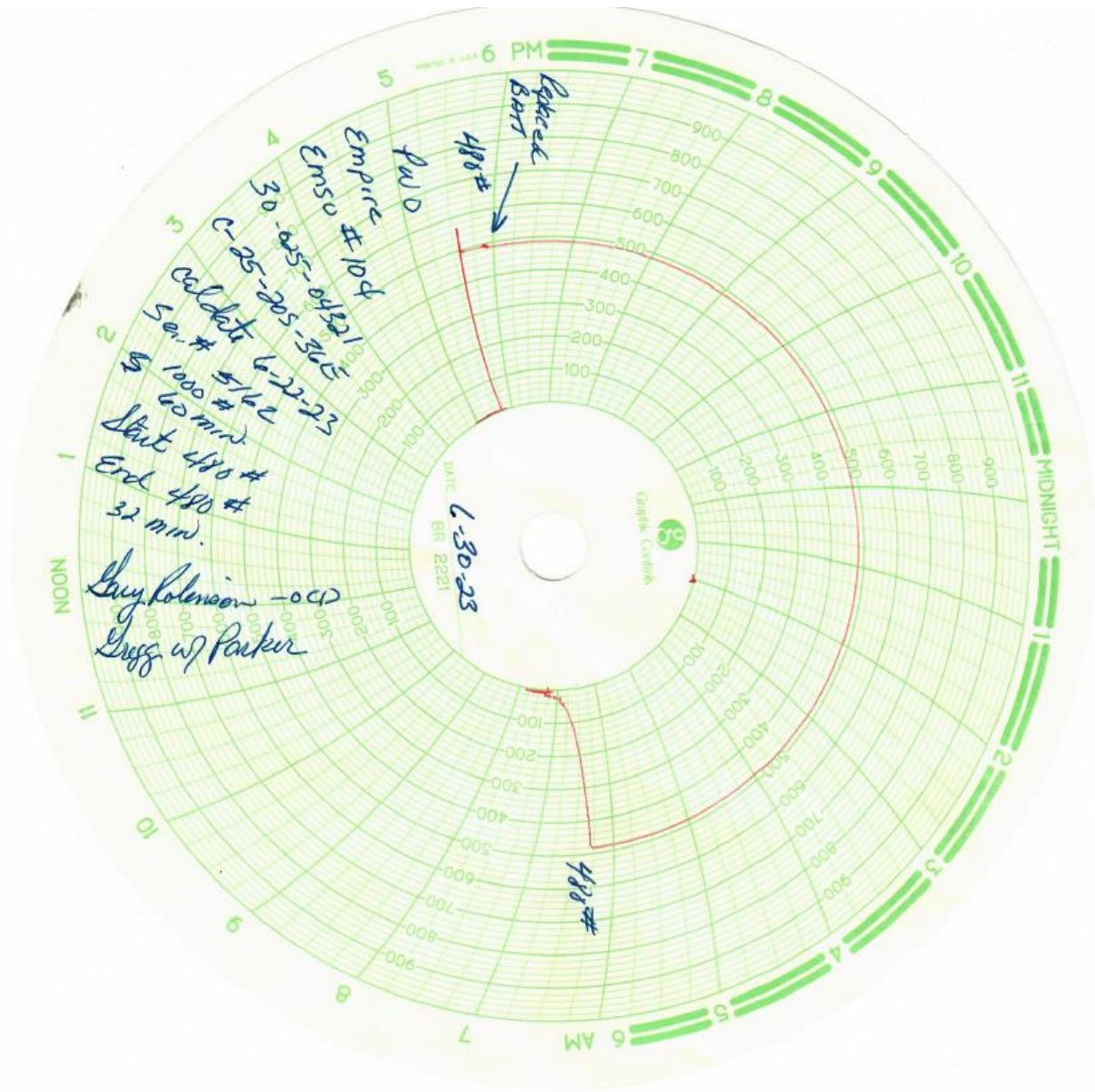
SIGNATURE Nathan Sandel TITLE Production Engineer DATE 07/03/2023

Type or print name Nathan Sandel E-mail address: nsandel@empirepetrocorp.com PHONE: 918-404-4202

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 7/13/23

Conditions of Approval (if any):



Director
1621 N. Foothill Dr., Hobbs, NM 88240
Phone: (505) 392-6151 Fax: (505) 392-6720

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

BRADENHEAD TEST REPORT

Operator Name EMPIRE	API Number 30-025-04321
Property Name EMSU	Well No. #104

* Surface Location									
UL - Lat C	Section 25	Township 20S	Range 36E	Feet from 660	N/S Line N	Feet from 1980	E/W Line W	County LEA	

Well Status										
YES	TA'D WELL NO	YES	SHUT-IN NO	INJ	INJECTOR	SWD	OIL	PRODUCER	GAS	DATE 6-30-23

OBSERVED DATA

	(A) Surface	(B) Interf (1)	(C) Interf (2)	(D) Prod Case	(E) Tubing
Pressure	0	0		0	0
Flow Characteristics					
Puff	Y/N N	Y/N N	Y/N	Y/N N	CO2 WTR <input checked="" type="checkbox"/> GAS Type of fluid trapped for waterflood studies
Steady Flow	Y/N N	Y/N N	Y/N	Y/N N	
Surge	Y/N N	Y/N N	Y/N	Y/N N	
Down to nothing	Y/N N	Y/N N	Y/N	Y/N N	
Gas or Oil	Y/N N	Y/N N	Y/N	Y/N N	
Water	Y/N N	Y/N N	Y/N	Y/N N	

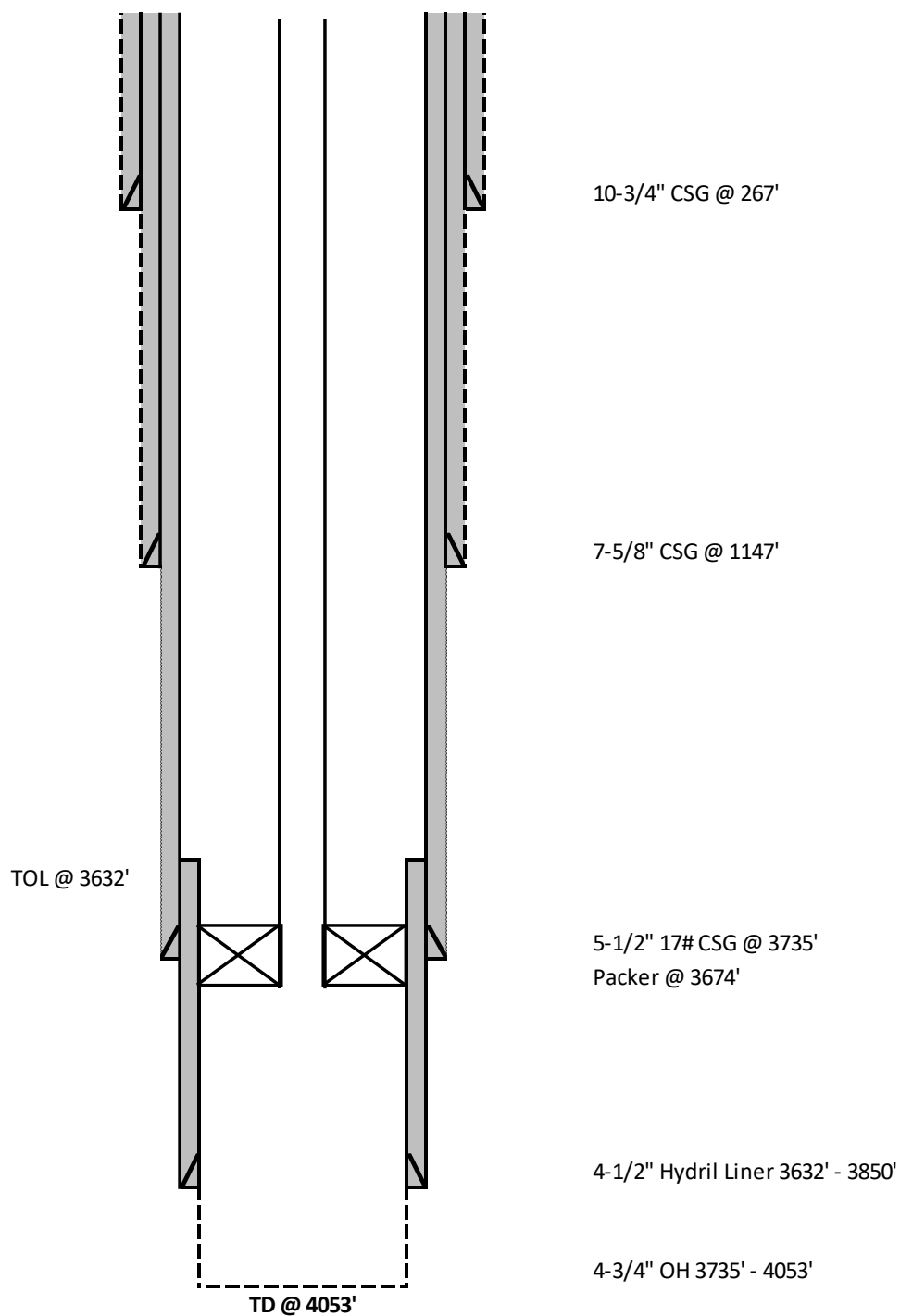
Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

PWD mit/BHT

Signature: Hector Ornelas	OIL CONSERVATION DIVISION Entered into RBDMS Re-test OK
Printed name: Hector Ornelas	
Title: Consultant	
E-mail Address: hector75ornelas@gmail.com	
Date: 6-30-23	
Phone:	
Witness: Gary Robinson	

INSTRUCTIONS ON BACK OF THIS FORM

Current WBD



District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720
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1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 235477

CONDITIONS

Operator: Empire New Mexico LLC 2200 S. Utica Place Tulsa, OK 74114	OGRID: 330679
	Action Number: 235477
	Action Type: [C-103] Sub. Workover (C-103R)

CONDITIONS

Created By	Condition	Condition Date
kfortner	None	7/13/2023