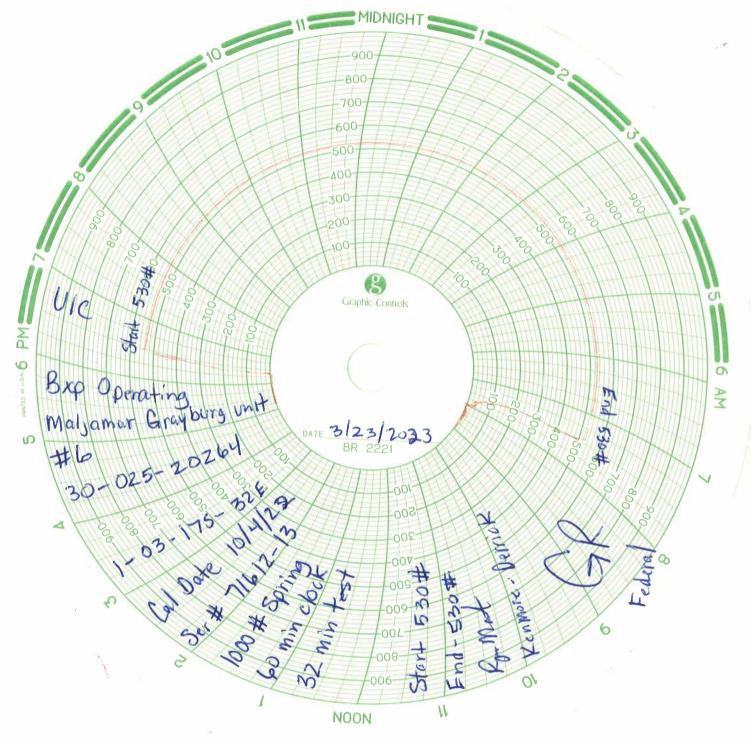
Recained by QCD A862/2423 11449:41 AM Office	State of New Mexico	Form CPass 1 of.
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283	OIL CONSERVATION DIVISION	30-025-20264
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Sunta 1 C, 14141 07303	o. State Off & Gas Lease No.
	AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS DIFFERENT RESERVOIR. USE "APPLICATION"	TO DRILL OR TO DEEPEN OR PLUG BACK TO A ON FOR PERMIT" (FORM C-101) FOR SUCH	MALJAMAR GRAYBURG UNIT
PROPOSALS.)		8. Well Number # 06
	Well INJECTION	0. OCDID Number 220497
2. Name of Operator  BXP OPERA	ATING LLC	9. OGRID Number 329487
3. Address of Operator		10. Pool name or Wildcat
1515 WEST CALLE SUR, SUITE 174	NEW MEXICO 88240	MALJAMAR; GRAYBURG; SAN ANDREAS
4. Well Location		THIORES
Unit Letter I_ : 1980 f	feet from theSOUTH_ line and660	feet from theEAST_ line
Section 03 Town		
11	. Elevation (Show whether DR, RKB, RT, GR,	etc.)
All the second and the second second second and the second		Marie Committee of the
12. Check Appr	opriate Box to Indicate Nature of Noti	ice, Report or Other Data
	•	•
NOTICE OF INTEN	NTION TO: S UG AND ABANDON ☐ REMEDIAL V	UBSEQUENT REPORT OF: VORK ☐ ALTERING CASING ☐
		DRILLING OPNS. P AND A
	JLTIPLE COMPL   CASING/CEN	
DOWNHOLE COMMINGLE	_	
CLOSED-LOOP SYSTEM		
OTHER:	operations (Clearly state all pertinent details	5 YEAR MIT Some stimated date some stimated date
	SEE RULE 19.15.7.14 NMAC. For Multiple	
proposed completion or recompl		
3/23/2023 PERFORMED 5 YR MIT TES	TZ	
START – 530#	<i>7</i> 1	
END – 530 #		
32 MINUTE TEST		
MIT PASSED		
Spud Date:	Rig Release Date:	
I have be a satisfy that the instrument in the		1.1
i hereby certify that the information abov	e is true and complete to the best of my know	leage and belief.
$\sim$ $\sim$ $\sim$ $\sim$ $\sim$		3/77/
SIGNATURE THE STATE OF THE STAT	TITLE AGENT AGENT	DATE //23/23
For State Use Only	TITLEAGENT_ E-mail address: _MYMERCH@PENROCO	IL.COM PHONE: 5/5-492-1236
APPROVED BY:Conditions of Approval (if any):	TITLE	DATE
Conditions of Approval (If any):		



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

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** 

CONDITIONS

Action 247083

## **CONDITIONS**

Operator:	OGRID:
BXP Operating, LLC	329487
11757 KATY FREEWAY	Action Number:
HOUSTON, TX 77079	247083
	Action Type:
	[C-103] Sub. General Sundry (C-103Z)

## CONDITIONS

Created By		Condition Date
gcordero	None	10/4/2023