

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.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		WELL API NO. 30-015-49456
2. Name of Operator Murchison Oil and Gas, LLC		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 7250 Dallas Parkway, Suite 1400, Plano, TX 75024		6. State Oil & Gas Lease No. L008960002
4. Well Location Unit Letter <u>P</u> : <u>200</u> feet from the <u>South</u> line and <u>250</u> feet from the <u>East</u> line Section <u>2</u> Township <u>25S</u> Range <u>26E</u> NMPM <u>Eddy</u> County		7. Lease Name or Unit Agreement Name Jawbone Federal Com XYA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3331 GL		8. Well Number 007H
		9. OGRID Number 15363
		10. Pool name or Wildcat Purple Sage Wolfcamp, Gas

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

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 checked="" 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: <input 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.

Request to change Dedicated Acres from 360 to 640 to conform with Purple Sage Wolfcamp, Gas (98220) rules.
 Amended C-102 and approved BLM form 3160-5 attached.

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  TITLE COO DATE 05/25/2023

Type or print name Gary R. Cooper E-mail address: rcooper@jdmii.com PHONE: 972-931-0700
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
 Conditions of Approval (if any): _____

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State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-49456	² Pool Code 98220	³ Pool Name PURPLE SAGE WOLFCAMP, GAS
⁴ Property Code 332751	⁵ Property Name JAWBONE FED COM XYA	
⁷ OGRID No. 15363	⁸ Operator Name MURCHISON OIL AND GAS, LLC	⁶ Well Number 7H ⁹ Elevation 3331.3

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	2	25 S	26 E		200	SOUTH	250	EAST	EDDY

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	35	24 S	26 E		330	NORTH	2180	EAST	EDDY
¹² Dedicated Acres 640		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

640 Acres

NOTE: LATITUDE AND LONGITUDE COORDINATES ARE SHOWN USING THE NORTH AMERICAN DATUM OF 1983 (NAD83). LISTED NEW MEXICO STATE PLANE EAST COORDINATES ARE GRID (NAD83) BASIS OF BEARING AND DISTANCES USED ARE NEW MEXICO STATE PLANE EAST COORDINATES MODIFIED TO THE SURFACE. ELEVATION VALUES ARE NAVD83.

WELL LOCATION: JAWBONE FED COM XYA 7H
ELEV. = 3331.3'
LAT. = 32.1523556°N (NAD83)
LONG. = 104.2560892°W

BOTTOM OF HOLE:
LAT. = 32.1800783°N
LONG. = 104.2621576°W

FIRST TAKE POINT:
330' FSL, 8180' PEL
LAT. = 32.1525270°N
LONG. = 104.2623225°W

¹⁷ OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: *[Signature]* Date: 05/04/2021

Printed Name: GARY R. COOPER

E-mail Address: rcooper@jdmii.com

¹⁸ SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

DATE: FEBRUARY 4, 2021

Date of Survey: *[Signature]*

Signature and Seal of Professional Surveyor: *[Signature]*

Certificate Number: 17297

PROFESSIONAL SURVEYOR NO. 8662

Form 3160-5 (June 2019)	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT	FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2021
SUNDRY NOTICES AND REPORTS ON WELLS <i>Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.</i>		5. Lease Serial No. NMNM0441951
		6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2		7. If Unit of CA/Agreement, Name and/or No.
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. JAWBONE FED COM XYA/7H
2. Name of Operator MURCHISON OIL & GAS LLC		9. API Well No. 3001549456
3a. Address 7250 Dallas Parkway, Ste. 1400, Plano, TX 7502	3b. Phone No. (include area code) (972) 931-0700	10. Field and Pool or Exploratory Area Purple Sage/Wolfcamp Gas
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) SEC 2/T25S/R26E/NMP		11. Country or Parish, State EDDY/NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA					
TYPE OF SUBMISSION		TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off	
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other	
	<input checked="" type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon		
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal		

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be perfonned or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has detennined that the site is ready for final inspection.)

Change Dedicated Acres from 360 to 640 acres to conform with Purple Sage Wolfcamp, Gas (98220) rules. Amended C-102 attached.

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) CINDY COTTRELL / Ph: (972) 931-0700	Title Regulatory Coordinator
Signature	Date 06/27/2023

THE SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved by CHRISTOPHER WALLS / Ph: (575) 234-2234 / Approved	Title Petroleum Engineer	Date 07/27/2023
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office CARLSBAD	

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

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CONDITIONS

Action 245357

CONDITIONS

Operator: Murchison Oil and Gas, LLC 7250 Dallas Parkway Plano, TX 75024	OGRID: 15363
	Action Number: 245357
	Action Type: [C-103] NOI Change of Plans (C-103A)

CONDITIONS

Created By	Condition	Condition Date
ward.rikala	None	10/25/2023