

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

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

WELL API NO. 30-025-04635	
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 390	
9. OGRID Number 330679	
10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres	
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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: Injection 2. Name of Operator Empire Petroleum Corporation 3. Address of Operator 2200 S. Utica Place, Suite 150, Tulsa, Oklahoma 74114 4. Well Location Unit Letter <u>F</u> : <u>1980</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>14</u> Township <u>21S</u> Range <u>36E</u> NMPM Lea County 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:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <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 a wellbore diagram of proposed completion or recompletion.

- MIRU workover rig
- Released packer and scanned tubing OOH.
- RIH with bit and scraper to PBTD.
- RIH with RBP and set @ 3634'.
- Pressure tested casing - held.
- RIH with redressed packer and tubing and set @ 3637'.
- Circulated packer fluid down the backside.
- Notified NMOCD of MIT.
- Performed MIT – passed – and submitted results to NMOCD.
- RDMO.
- RTI.

Spud Date:

Rig Release Date:

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

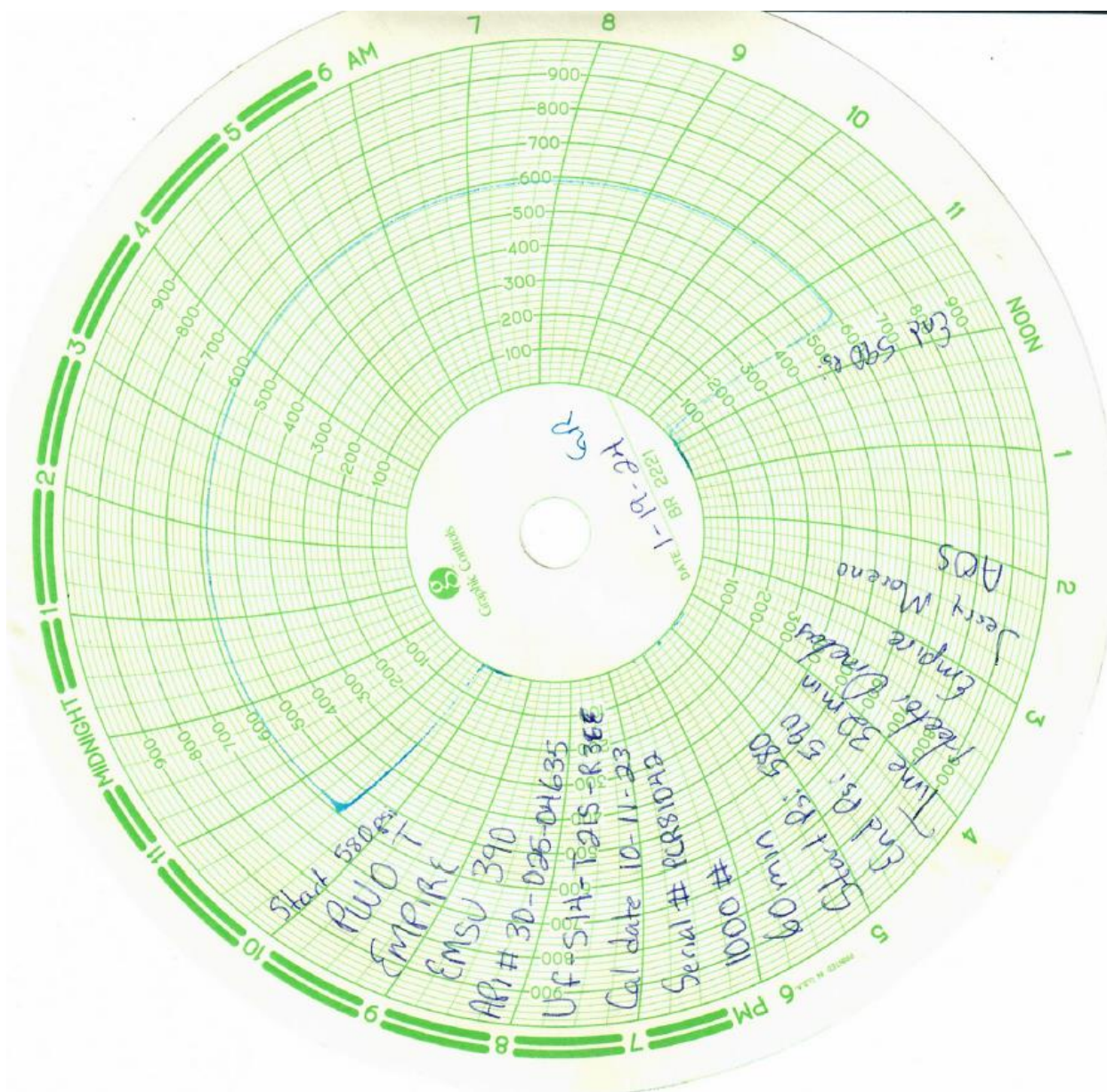
SIGNATURE Nathan Sandel TITLE Production Engineer DATE 01/23/2024

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 1/25/24

Conditions of Approval (if any):



District I  
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**

Operator Name Empire New Mexico LLC	*API Number 30-025-04635
Property Name EMSU	Well No. 390

**2. Surface Location**

UL - Lot F	Section 14	Township 21S	Range 36E	Feet from	N/S Line	Feet From	E/W Line	County LEA
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**Well Status**

TA'D WELL YES	NO	YES	SHUT-IN NO	INJECTOR INJ	SWD	OIL	PRODUCER GAS	DATE 1-19-24
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**OBSERVED DATA**

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Cng	(E)Tubing
Pressure	0	0		0	0
<b>Flow Characteristics</b>					
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	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	Y / N	Y / N	Y / N	Y / N	
Water	Y / N	Y / N	Y / N	Y / N	

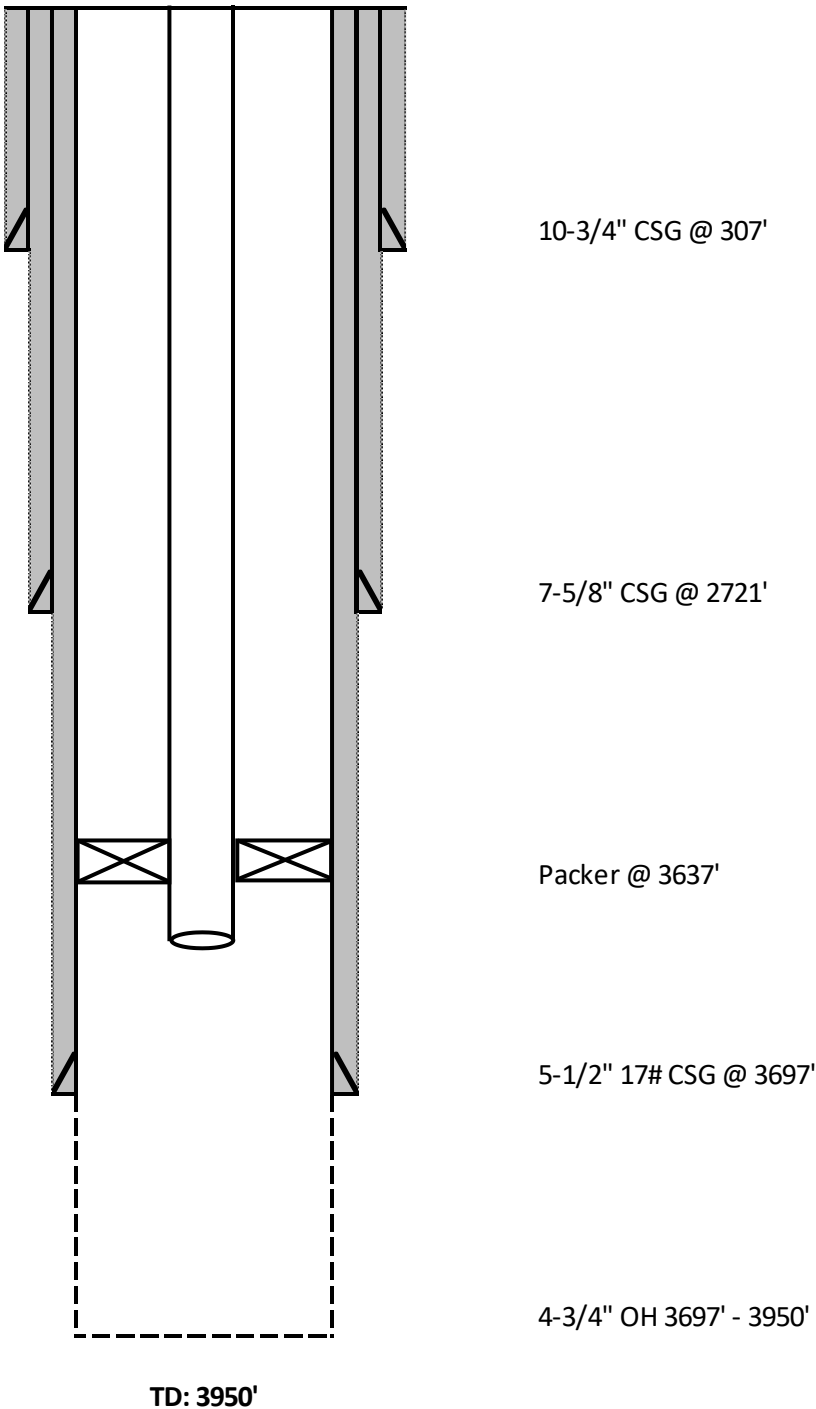
Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

PWO  
MT/BHT

Signature: <i>Hector Ornelas</i>	OIL CONSERVATION DIVISION
Printed name: Hector Ornelas	Entered into RBDMS
Title: Consultant	Re-test
E-mail Address: hector.ornelas@gmail.com	
Date: 1-19-24	
Phone: 575 942 4004	
Witness: GR	



**Current WBD**



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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 306861

CONDITIONS

Operator: Empire New Mexico LLC 2200 S. Utica Place Tulsa, OK 74114	OGRID: 330679
	Action Number: 306861
	Action Type: [C-103] Sub. Workover (C-103R)

CONDITIONS

Created By	Condition	Condition Date
kfortner	None	1/25/2024