

Santa Fe Main Office  
Phone: (505) 476-3441  
General Information  
Phone: (505) 629-6116

State of New Mexico  
Energy, Minerals and Natural Resources

Online Phone Directory Visit:  
<https://www.emnrd.nm.gov/ocd/contact-us/>

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

<p align="center"><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.)</p>		WELL API NO. 30-015-56924
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator PALOMA PERMIAN ASSETCO, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 1100 LOUISIANA STE 5100, HOUSTON, TX 77002		7. Lease Name or Unit Agreement Name THE DUDE FEE 20 19 C
4. Well Location Unit Letter <u>H</u> : <u>1882</u> feet from the <u></u> <u>N</u> line and <u>157</u> feet from the <u></u> <u>E</u> line Section <u>20</u> Township <u>22S</u> Range <u>27E</u> NMPM County <u>EDDY</u>		8. Well Number 502H
		9. OGRID Number 332449
		10. Pool name or Wildcat PURPLE SAGE;WOLFCAMP (GAS)
		11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3122 GR

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

<p align="center"><b>NOTICE OF INTENTION TO:</b></p> 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"/>		<p align="center"><b>SUBSEQUENT REPORT OF:</b></p> REMEDIAL WORK <input 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 checked="" 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.

Paloma Permian AssetCo, LLC respectfully requests a variance approval to run tubing at a later date, once the well has stabilized.

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 Brittney Brunner TITLE Operations Tech DATE 1/13/2026

Type or print name Brittney Brunner E-mail address: bbrunner@palomaresources.com PHONE: 713-654-8534

**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

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CONDITIONS

Action 542470

**CONDITIONS**

Operator: Paloma Permian AssetCo, LLC 1100 Louisiana, Ste. 5100 Houston, TX 77002	OGRID: 332449
	Action Number: 542470
	Action Type: [C-103] NOI Change of Plans (C-103A)

**CONDITIONS**

Created By	Condition	Condition Date
ward.rikala	Please submit the tubing report once tubing has been installed.	2/10/2026