Initial

Application Part I

Received: <u>08/21/2019</u>

This application is placed in file for record. It MAY or MAY NOT have been reviewed to be determined Administratively Complete

Revised March 23, 2017

New Mexico Noiservario Noi	RECEIVED: 08/21/2019 REVIEWER:	TYPE: SWD	APP NO: pMAM1923343254
ADMINISTRATIVE APPLICATION CHECKLIST INDECRISE IS MARCHARDIGER FOR ALL ADMINISTRATIVE APPLICATION FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DVISION IDVEST IN AT PE Applicant: Status Wareh Mideream, LLC OGRID Number: 371643 Mommalk Fed SVD 91 Pool: Proposed: SVD. Devontant-Silnatar. Pool: Code: 97760 SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW INTER OF APPLICATION: Check those which apply for [A] ALLO COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW INTER OF APPLICATION: Check those which apply for [A] ALLO COMPLETE INFORMATION REQUIRED TO: Check those which apply. A. Location – Spacing Unit – Simultaneous Declication INTER OF APPLICATION REQUIRED TO: Check those which apply. A. Location – Spacing Unit – Simultaneous Declication INTER OF REQUIRED TO: Check those which apply. A. Offset operators or lease holders B. Reyatity, overriding royatity owners, revenue owners C. Application and/or concurrent approval by SLO EVALUATION REQUIRED TO: Check those which apply.	NEW MEX - Geolo 1220 South St.	ABOVE THIS TABLE FOR OCD DIVISION USE (ICO OIL CONSERVATION ogical & Engineering Bure Francis Drive, Santa Fe,	N DIVISION eau – NM 87505
THE CRECKLET IS MANDATORY FOR ALLADMINISTRATIVE APPLICATION FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING ATTHE DIVISION LEVEL IN SANTA FE Applicant: Moderation Solution (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	ADMINI	STRATIVE APPLICATION C	HECKLIST
Applicant: Soluris Water Midstream, LLC OGRID Number: 371943 Well Name: Meanwalk Fed SWD #1 Prool: Propond: SWD. #1 Prool: Propond: SWD. #1 Prool: Propond: SWD. #1 SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW SWD2251 1) TYPE OF APPLICATION: Check those which apply for [A] SWD2251 A. Location - Spacing Unit - Simultaneous Dedication NSL NSP PROJECT MEAN INSP PROJECT MEAN 1) Check one only for [1] or [1] [1] Commingling - Storage - Measurement DBHC Storage - Measurement Storage - Measurement 10 DHC DTP PMX SWD IPI ECOR PPR 2) NOTIFICATION REQUIRED TO: Check those which apply. A. B Offset operators or lease holders Application Content Complete 2. Notification and/or concurrent approval by SLO E. B Notification and/or concurrent approval by SLO Content Complete Application for administrative approval is accurate and complete to the best of my knowledge. Laso understand that no action will be taken on this application until the required information and notifications are submitted to the Division. Storement must be completed by an individual	THIS CHECKLIST IS MANDATORY FO REGULATIONS WHICI	R ALL ADMINISTRATIVE APPLICATIONS F H REQUIRE PROCESSING AT THE DIVISIO	OR EXCEPTIONS TO DIVISION RULES AND N LEVEL IN SANTA FE
Weil Name: Monitorial Fred SND #1 API: Prool: Provided: SWD. Devolute: SND: SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW SWD.22251 1) TYPE OF APPLICATION: Check those which apply for [A] SWD-2251 A. Location - Spacing Unit - Simultaneous Dedication [NSL] NSP project area OSP project area B. Check one only for [1] or [1] [1] Commingling - Storage - Measurement [DHC C] CTB OSD OLM [1] I] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery [1] WFX PMX [ISWD [IPI] EOR [PPR] FOR OCD ONLY A. [] Offset operators or lease holders [I] Notification and/or concurrent approval by SLO Content Complete C. [] Application requires published notice [I] Notification and/or concurrent approval by BLM F. [I] Surface owner G. [] For all of the above, proof of notification or publication is attached, and/or, No notice required 30 CERTIFICATION: I hereby certify that the information submitted with this application and nor concurrent approval by SLD Deficient or action will be taken on this application until the required information and notification. Note: Statement must be completed by an individual with managerial and/or supervisory capacity. May 16, 2019 Date Statement m	Applicant: Solaris Water Midstream, LLC		OGRID Number: 371643
Proof Code: 1000000000000000000000000000000000000	Well Name: Moonwalk Fed SWD #1		API:
SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED BELOW SWD-2251 1) TYPE OF APPLICATION: Check those which apply for [A] A. Location - Spacing Unit - Simultaneous Dedication NSL NSP (PRORECLASEA) SWD-2251 2) NSL NSP (PRORECLASEA) NSP (PRORECLASEA) SSD 3) Check one only for [1] or [11] [1] Commingling - Storage - Measurement DHC SSD Storage - Measurement DHC SSD 4) NOTIFICATION REQUIRED TO: Check those which apply. A. @ Offset operators or lease holders Notifice Complete Den Notification requires published notice PR 2) NOTIFICATION REQUIRED TO: Check those which apply. A. @ Offset operators or lease holders Motification and/or concurrent approval by SLO Protection 5. Notification and/or concurrent approval by BLM F. @ Surface owner Complete Application Content Complete 6. For all of the above, proof of notification or publication is attached, and/or, H. No notice required No notice required 3) CERTIFICATION: I hereby certify that the information submitted with this application for administrative approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division. July 16.2019 Date Signature Signature	Pool: Proposed: SWD, Devonian-Silurian		Pool Code: 97869
1) TYPE OF APPLICATION: Check those which apply for [A] SWD-2251 A. Location - Spacing Unit - Simultaneous Dedication NSI NSL NSPprotect AREAL NSPprotect AREAL NSL NSPprotect AREAL NSPprotect AREAL SD B. Check one only for [1] or [11] [1] Commingling - Storage - Measurement DHC DC OLS OLM [1] Injection - Disposal - Pressure Increase - Enhanced Oli Recovery WFX PMX SWD PIP EOR PPR 2) NOTIFICATION REQUIRED TO: Check those which apply. A. @ Offset operators or lease holders Application Application Content Complete Application C.@ Application and/or concurrent approval by SLO E.@ Notification and/or concurrent approval by BLM Notice Complete Application F.@ Surface owner G.@ For all of the above, proof of notification or publication is attached, and/or, H. No notice required 3) CERTIFICATION: I hereby certify that the information submitted with this application for administrative approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division. July 16.2019 Date Signature Signature Signature Sig	SUBMIT ACCURATE AND COMPLETE	INFORMATION REQUIRED T	O PROCESS THE TYPE OF APPLICATION
A. Location – Spacing Unit – Simultaneous Decication NSL NSP PROJECT AREA) NSL NSP PROJECT AREA) SD B. Check one only for [1] or [1] [1] Commingling – Storage – Measurement DHC CTB DHC CTB II] Injection – Disposal – Pressure Increase – Enhanced Oil Recovery WFX PMX III] Injection – Disposal – Pressure Increase – Enhanced Oil Recovery WFX PMX III] Offset operators or lease holders B. Royalty, overriding royalty owners, revenue owners C. Application requires published notice D. Notification and/or concurrent approval by SLO E. Notification and/or concurrent approval by BLM F. B. Surface owner G. For all of the above, proof of notification or publication is attached, and/or, H. No notice required 3) CERTIFICATION: I hereby certify that the information submitted with this application for administrative approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division. Note: Statement must be completed by an individual with managefal and/or supervisory capacity. Print or Ype Name Signature	1) TYPE OF APPLICATION: Check tho	se which apply for [A]	SWD-2251
8. Check one only for [1] or [11] [1] Commingling - Storage - Measurement DHC CTB [11] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery [11] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery [11] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery [11] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery [11] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery [11] WFX [11] NPR (State operators or lease holders 8. B. B. Royalty, overriding royalty owners, revenue owners C. C. Application requires published notice D. Notification and/or concurrent approval by SLO E. E. Notification and/or concurrent approval by BLM F. Surface owner G. For all of the above, proof of notification or publication is attached, and/or, H. No notice required 30 CERTIFICATION: I hereby certify that the information submitted with this application for administrative approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division.	A. Location – Spacing Unit – Sim		
Randall Hicks (agent) July 16.2019 Print or Type Name 505 238 9515 Work Note: Statement must be completed by an individual with managerial and/or supervisory capacity. Print or Type Name Signature	 B. Check one only for [1] or [1] [1] Commingling – Storage – DHC CTB [[1] Injection – Disposal – Pre WFX PMX [2) NOTIFICATION REQUIRED TO: Che A. Offset operators or lease B B. Royalty, overriding royalty C. Application requires publ D. Notification and/or conce E. Notification and/or conce F. Surface owner G. For all of the above, proc H. No notice required 3) CERTIFICATION: I hereby certify the administrative approval is accurated] -Measurement]PLC PC OLS essure Increase – Enhanced SWD IPI EOR ck those which apply. holders y owners, revenue owners ished notice urrent approval by SLO urrent approval by SLO urrent approval by BLM of of notification or publica	OLM Oil Recovery PPR FOR OCD ONLY Notice Complete Application Content Complete
Randall Hicks (agent) July 16, 2019 Print or Type Name Date Signature 100 Constraints	understand that no action will be notifications are submitted to the	taken on this application Division.	until the required information and
Randall Hicks (agent) Print or Type Name July 16, 2019 Date 505 238 9515 Phone Number Signature	Note: Statement must be con	npleted by an individual with manag	gerial and/or supervisory capacity.
Signature 505 238 9515 Phone Number e-mail Address	Randall Hicks (agent)		ate
Signature Phone Number r@rthicksconsult.com		5	05 238 9515
Signature e-mail Address	Kand al bl	Ρ	
	Signature		-mail Address

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 DISTRICT IV

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

Form C-102 ^m Revised August 1, 2011 Submit one copy to appropriate

WELL LOCATION	AND	ACREAGE	DFDICA	TION PLAT	
WELL LOCATION	AND	ACKEAGE		MUNILAI	

API Number		Pool Code 97869	SWD; DEVONIAN	SWD; DEVONIAN		
Property Code		Prop MOONWA	erty Name ILK FED SWD	Well Number #1		
OGRID No. 371643		SOLARIS WATE	Elevation 3670'			
Surface Location						

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	28	23S	32E		1430	SOUTH	300	EAST	LEA
	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

Dedicated Acres	Joint or	Infill	Consolidated Co	ie C	rder No.		
5.51							
	•						

(625 N. French Dr., Ho Phone: (575) 393-6161 DISTRICT II 111 S. First St., Artesia, Phone: (575) 748-1283 DISTRICT III 1000 Rio Brazos Rd., A Phone: (505) 34-6178 DISTRICT IV 1220 S. St. Francis Dr., Phone: (505) 476-3460	obbs, NM 8824 1 Fax: (575) 39 a, NM 88210 3 Fax: (575) 74 Aztec, NM 874 8 Fax: (505) 33 , Santa Fe, NM 0 Fax: (505) 47	0 3-0720 8-9720 10 4-6170 87505 6-3462		Energy, I C	Minerals & Natural Resources Department OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, New Mexico 87505						Revised August 1, 2011 Submit one copy to appropriate District Office		
	AI	PI Number	WE	LL LOCA	TION Pool Code	NAND A	CREA	GE DEI	DICAT	Pool Name			
Dec	onarty Co	da			97869) Pro	porty Nama		5	SWD; DEVONI	AN	umbor	
110	openy co	uc				MOONW	ALK FED	D SWD			#	1	
o 3	OGRID No 87164	o. 3			SOLAI	RIS WATE	erator Name	STREAM,	LLC		Elevat 367	tion 'O'	
				1		Surfac	ce Locati	ion					
UL or lot i	no.	Section 28	Township 23S	Range 32E	Lot Idi	n Feet f	from the 430	North/So SOL	uth line JTH	Feet from the 300	East/West line EAST	County LEA	
				Bott	om Ho	le Location	n If Diffe	erent Fror	n Surfac	e			
UL or lot i	no.	Section	Township	Range	Lot Idı	n Feet f	from the	North/So	uth line	Feet from the	East/West line	County	
Dedicated 5.5 No allowa division.	Acres 1 able wi	Joint or	ned to this	Consolidated Cod	until all	Order No.	ve been co	onsolidated	d or a nor	n-standard unit ha	as been approved	by the	
20	NW CO LAT.: 32 LON.: -1 21	RNER 2.2828067°N 103.6881558°W					LAT.: 3 LON.: -10	NE CORNER 32.2828599°N 3.6710603°W 21	22	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 organizatio either owns a working interest or unleased		ATION contained st of my rganization leased g the	
29	28							28	21	proposed bottom drill this well a: contract with an working interest, agreement or a heretofore entere	hole location or has t this location pursua owner of such a mi or to voluntary pool compulsory pooling or d by the division.	a right to nt to a neral or ing der	
							 			Signature	Da	ite	
										Print Name			
										E-mail Address			
			-+ 	2 8	8 —					SURVEY I hereby certify t plat was plotted j made by me or u same is true and	DRS CERTIFIC hat the well location from field notes of ac nder my supervision, correct to the best o	ATION shown on this ctual surveys and that the f my belief.	
			 _+	 	M	IOONWALK FI SHL: GR. E <u>NMSP-</u> N.(Y): E.(X):	ED SWD #1 LEV. 3670' <u>E (NAD 83)</u> = 463410.0' = 745728.7'	300'		APRIL 23, 201 Date of Survey Signature and Seal of	Professional Serveyor.	Mot	
						LAT.: = 32.: LON.: = 103.6 <u>NMSP-</u> N.(Y): E.(X): LAT.: = 32.:	2722574° N 3720262° W E (NAD 27) = 463350.7' = 704545.1' 2721340° N	1430'			14729	Service SN 0	
29	28		' 			LON.: = 103.6	6715433° W	28	27	amer	TOFERSIONN		
32	33 SW CO LAT.: 32	RNER 2.2682774°N					LAT.: 3	33 SE CORNER 32.2683297°N 3.6710532°W	34	Job Vo.: WTCS JAMES E. TOMPKI	53199 NS 14729	Draft: M.P.	

LOCATION VERIFICATION MAP



MILES. THE STAKED LOCATION FLAG IS TO THE SOUTHEAST ±606 FEET FROM



SURVEYS/SOLARIS I 2019 11:11 AM

X:\PROJEC X:\PROJEC

PLAT: X CO.NM

WTC, INC. 405 S.W. 1st Street Andrews, TX 79714 (432) 523-2181

WELL NAME: MOONWALK FED SWD #1





THE LEASE ROAD.

AERIAL MAP



COUNTY: LEA

DESCRIPTION: 1430' FSL & 300' FEL

OPERATOR: SOLARIS WATER MIDSTREAM, LLC

STATE: NEW MEXICO

WELL NAME: MOONWALK FED SWD #1

WTC, INC. 405 S.W. 1st Street Andrews, TX 79714 (432) 523-2181







PLAT: Y

SCALE: 1" = 2000'

BEGINNING AT THE INTERSECTION OF US-285 AND POTASH MINES RD. IN CARLSBAD, NEW MEXICO; HEAD EASTERLY ON POTASH MINES RD. FOR ±7.7

MILES TO JAL HWY ROAD. TURN RIGHT. HEAD EASTERLY/SOUTHEASTERLY FOR \pm 19.0 MILES TO COUNTY RD. 31. TURN LEFT. HEAD NORTHEAST FOR \pm 3.8 MILES. THE STAKED LOCATION FLAG IS TO THE SOUTHEAST \pm 606 FEET FROM

DRIVING DIRECTIONS:

THE LEASE ROAD.



PLAT: CO.NA

STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL **RESOURCES DEPARTMENT**

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, New Mexico 87505

	APPLICATION	FOR AUTHO	DRIZATION TO IN	<u>IJECT</u>		
I.	PURPOSE:Secondary Recovery Application qualifies for administrative approval	I	Pressure Maintenance Yes	eX No	Disposal	Storage
II.	OPERATOR: _Solaris Water Midstream, LLC					
	ADDRESS:907 Tradewinds Blvd, Suite B, Mi	dland, TX 797	706			
	CONTACT PARTY:Randall Hicks (Agent)			_PHONE: _	505 238 9515	
III.	WELL DATA: Complete the data required on the Additional sheets may be attached	reverse side o if necessary.	f this form for each w	vell propos	ed for injection.	
IV.	Is this an expansion of an existing project? If yes, give the Division order number authorizing	Yes	XNo			
V.	Attach a map that identifies all wells and leases w drawn around each proposed injection well. This	ithin two miles circle identifie	s of any proposed injo s the well's area of re	ection well eview.	with a one-half mile	e radius circle
VI.	Attach a tabulation of data on all wells of public r data shall include a description of each well's type of any plugged well illustrating all plugging detai	ecord within th , construction,	e area of review which date drilled, location	ch penetrat , depth, rec	e the proposed inject cord of completion, a	tion zone. Such and a schematic
VII.	Attach data on the proposed operation, including:					
	 Proposed average and maximum daily rate and Whether the system is open or closed; Proposed average and maximum injection pre Sources and an appropriate analysis of injection produced water; and, If injection is for disposal purposes into a zone chemical analysis of the disposal zone format wells, etc.). 	d volume of flu ssure; on fluid and co e not productiv on water (may	uids to be injected; mpatibility with the r re of oil or gas at or w be measured or infe	receiving fo vithin one r rred from e	ormation if other that nile of the proposed existing literature, stu	n reinjected well, attach a udies, nearby
*VIII.	Attach appropriate geologic data on the injection Give the geologic name, and depth to bottom of a dissolved solids concentrations of 10,000 mg/l or be immediately underlying the injection interval.	zone including Il underground less) overlyin	g appropriate litholog d sources of drinking g the proposed inject	ic detail, go water (aqu ion zone as	eologic name, thickn ifers containing wate well as any such so	ess, and depth. ers with total urces known to
IX.	Describe the proposed stimulation program, if any	<i>.</i>				
*X.	Attach appropriate logging and test data on the we	ell. (If well log	gs have been filed wit	th the Divis	sion, they need not b	e resubmitted).
*XI.	Attach a chemical analysis of fresh water from two injection or disposal well showing location of wel	o or more fresh s and dates san	n water wells (if avail mples were taken.	able and p	oducing) within one	mile of any
XII.	Applicants for disposal wells must make an affirm and find no evidence of open faults or any other h drinking water.	native stateme hydrologic con	nt that they have examined in the original section between the original section between the original section.	mined avai disposal zo	lable geologic and en ne and any undergro	ngineering data ound sources of
XIII.	Applicants must complete the "Proof of Notice" s	ection on the r	everse side of this for	rm.		
XIV.	Certification: I hereby certify that the information belief. NAME: Randall Hicks	submitted with	n this application is tru T	ue and corr	ect to the best of my	knowledge and

SIGNATURE:

IIILE: _Agent_

__DATE: __7/30//2019___

E-MAIL ADDRESS: _____R@rthicksconsult.com___

andul

If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. * Please show the date and circumstances of the earlier submittal: _ _____

- III. WELL DATA
- A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:
 - (1) Lease name; Well No.; Location by Section, Township and Range; and footage location within the section.
 - (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
 - (3) A description of the tubing to be used including its size, lining material, and setting depth.
 - (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District Offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

- B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.
 - (1) The name of the injection formation and, if applicable, the field or pool name.
 - (2) The injection interval and whether it is perforated or open-hole.
 - (3) State if the well was drilled for injection or, if not, the original purpose of the well.
 - (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
 - (5) Give the depth to and the name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) The intended purpose of the injection well; with the exact location of single wells or the Section, Township, and Range location of multiple wells;
- (3) The formation name and depth with expected maximum injection rates and pressures; and,

(4) A notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

INJECTION WELL DATA SHEET

OPERATOR:Solaris	Water Midstream, LLC				
WELL NAME & NUM	IBER: _Moonwalk Fed SWD #1				
WELL LOCATION:	1430 FSL 300 FEL	Ι	28	238	32E
	FOOTAGE LOCATION	UNIT LETTER	SECTION	TOWNSHIP	RANGE
WELLI	<u>BORE SCHEMATIC</u>		<u>WELL C</u> Surface	<u>ONSTRUCTION DAT</u> Casing	<u>ΓΑ</u>
		Hole Size:See A	ttachments	Casing Size:	
		Cemented with:	SX.	or	$ ft^3$
		Top of Cement:		Method Determine	d:
			<u>Intermedia</u>	te Casing	
		Hole Size:		Casing Size:	
		Cemented with:	SX.	or	ft ³
		Top of Cement:		Method Determine	d:
			Productio	n Casing	
		Hole Size:		Casing Size:	
		Cemented with:	SX.	or	ft ³
		Top of Cement:		Method Determine	d:
		Total Depth:			
			Injection	Interval	
			fee	t to	

(Perforated or Open Hole; indicate which)

Side 1

INJECTION WELL DATA SHEET

Tuł	Ding Size:See AttachmentsLining Material:
Туŗ	pe of Packer:
Pac	eker Setting Depth:
Oth	ner Type of Tubing/Casing Seal (if applicable):
	Additional Data
1.	Is this a new well drilled for injection?X_YesNo
	If no, for what purpose was the well originally drilled?
2.	Name of the Injection Formation:Proposed: SWD, Devonian-Silurian
3.	Name of Field or Pool (if applicable):
4.	Has the well ever been perforated in any other zone(s)? List all such perforated
	Intervals and give plugging detail, i.e. sacks of cement of plug(s) usedNo
5.	Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: _See Attachments
	J

Attachments to C-108

Copy of well bore diagram

Section III-XII Written descriptions to supplement C-108 Plates referenced in written descriptions Tables referenced in written descriptions OCD well reports referenced in written descriptions OSE well logs referenced in written descriptions

Section XIII Proof of Notice



III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include

1. Lease name; Well No.; Location by Section, Township and Range; and footage location within the section

Lease Name: Moonwalk Fed SWD #1 Unit Letter I, Section 28, T23S R32E, 1430 FSL, 300 FEL

Figure 1

2. Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined

The attached Wellbore Data Sheet provides all of the design specifics required and a tabulation of these data are shown on the diagram.

The formation tops were established by Jim Brannigan, R.G. CPG. Tops were picked from offset deep wells, scout tickets and GeoMaps. The result of the evaluation of Mr. Brannigan is presented to the right (Figure 1).

3. A description of the tubing to be used including its size, lining material, and setting depth

5-1/2" (20#) internal plastic coated tubing swaged down to 5" (18#) with setting depth of 17,158'

4. The name, model, and setting depth of the packer used or a description of any other seal system or assembly used

Halliburton BWS or equivalent packer set at 17,058'.

Formation	GL	3670
Tops	КВ	3700
	SS	TVD
Rustler	2420	1280
T/Salt	1995	1705
B/Salt	-930	4630
Lamar	-1180	4880
Bell Canyon	-1205	4905
Cherry Canyon	-2205	5905
Brushy Canyon	-3780	7480
Bone Spring	-5080	8780
1st BS Sand	-6280	9980
2nd BS Sand	-6830	10530
3rd BS Sand	-8155	11855
Wolfcamp	-8705	12405
Penn		
Cisco		
Canyon		
Strawn	-10480	14180
Atoka	-10605	14305
Morrow	-10855	14555
Morrow Clastics	-11255	14955
Morrow Lower		
Barnett	-12705	16405
Miss LM	-13155	16855
Woodford	-13475	17175
Devonian	-13980	17680
Fusselman	-14705	18405
1/Montoya	-15330	19030
Simpson		
Ellenburger		
Gtanite	47000	40000
Injection Interval	17680	18830
TD	18	830

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

(1) The name of the injection formation and, if applicable, the field or pool name

The proposed injection intervals include both the Devonian and Fusselman in an openhole interval.

(2) The injection interval and whether it is perforated or open-hole.

The depth interval of the open-hole injection interval is 17,680-18,830 (1,150 feet).

(3) State if the well was drilled for injection or, if not, the original purpose of the well.

The well will be drilled for disposal.

(4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations

There are no perforated intervals, only the open-hole completion described above.

(5) Give the depth to and the name of the next higher and next lower oil or gas zone in the area of the well, if any.

Overlying Oil & Gas Zones:

Bell Canyon (4,905') Cherry Canyon (5,905') Brushy Canyon (7,480') 1st BS Sand (9,980') 2nd BS Sand (10,530') 3rd BS Sand (11,855') Wolfcamp (12,405') Strawn (14,180') Atoka (14,305') Morrow (14,555')

Underlying Oil & Gas Zones:

None Exist

The proposed injection intervals include the Devonian and part of the Fusselman formations. The highly cemented carbonates of the Devonian and deeper formations will provide favorable open hole integrity in which to inject salt water without concern of the open hole section collapsing.

IV. Is this an expansion of an existing project $_{\rm No.}$

V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review

Plate 1a identifies all OCD listed wells and API numbers and shows circles with radii of 0.5, 1.0, and 2.0 miles. Note that where numerous wells are closely-spaced, the API number may not be labeled for clarity. New wells, active wells, plugged wells, and canceled wells have color-coded symbols. Plate 1b shows only new and active wells and circles with radii of 0.5 and 1.0 miles.

Table 1 lists all of the wells shown on Plate 1a within the circle having a 2.0 mile radius.

- Plate 2a presents the names of the lease holders for SLO and BLM oil and gas leases within a 2-mile radius area.
- Plate 2b presents State, BLM, and private land ownership for the same area.
- Table 2 lists BLM leaseholders and SLO Leaseholders for the lease numbers presented on Plate 2a within a 1-mile radius area.
- Table 2 also presents surface ownership information for the land within the 1mile radius area.

The Federal Government owns the surface upon which the SWD is located.

VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail

According to the data presented in Table 1, there are no wells within the 1.0-mile radius area of review that penetrate the proposed injection zone.

VII. Attach data on the proposed operation, including:

1. Proposed average and maximum daily rate and volume of fluids to be injected

Proposed Maximum Injection Rate: 40,000 bbl/day Proposed Average Injection Rate: 30,000 bbl/day

2. Whether the system is open or closed

This will be an open system. All Solaris SWDs may receive produced water from recycling storage facilities, such as in-ground containments or above-ground steel-walled containments, which are registered or permitted under Rule 34.

3. Proposed average and maximum injection pressure

Proposed Maximum Injection Pressure: 3,400 psi Proposed Average Injection Rate: 2,325 psi

4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water

The attached Table 3 "Produced Water" provides the requisite analyses. The Delaware-Brushy Canyon, Avalon, and Bone Springs Formations are the subjects of the analyses. These formations, in addition to the Wolfcamp Formation, will provide most of the produced water to the proposed SWD. At the time of writing, we are unaware of any problems associated with disposal of produced water derived from the Delaware-Brushy Canyon, Avalon, Bone Springs, and Wolfcamp Formations into the Devonian injection zone.

5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

Table 4 presents formational water quality data from the Go-Tech site for Devonianproducing wells. The closest wells (3 in T23S, R34E) in Table 4 are approximately 12 miles to the east. The other wells in Table 4 are located either 30 miles east-southeast or 30 miles west-northwest of the Moonwalk SWD. The value of these data for the purpose of evaluating potential problems relating to the injections of produced water into the proposed injection interval is probably poor. As stated above, we are unaware of any problems associated with disposal of produced water derived from the Delaware, Avalon, Bone Springs, and Wolfcamp Formations into the Devonian injection zone.

*VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth.

The proposed injection intervals include both the Devonian and Fusselman in an openhole interval. The highly cemented carbonate nature of the Devonian and Fusselman indicate that favorable open-hole integrity will exist, allowing for the saltwater to be injected without concern of collapse in the open-hole injection interval.

As indicated in Section III.A.2, the approximate depths to the top of the Devonian and the base of the Fusselman are 17,680 and 19,030 respectively. The injection depth interval of 17,680-18,830 (1,150 feet) is contained within these Formations.

Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.

In this area of Lea County, the Chinle yields water to wells from 100-200 feet below the ground surface (bgs) to a depth of about 600 feet. The material above the Chinle Formation to ground surface is mapped as alluvium and is most probably reworked Ogallala material.

The upper portion of the Rustler Formation yields fresh water to wells in southeastern Eddy County and in southwestern Lea County, the location of the Moonwalk SWD. The depth interval of this potential source of fresh water is about 700-1000 feet.

The locations of all water supply wells listed in public databases are shown in Plate 3. There exist seven wells within two miles of the location of the Moonwalk SWD.

The closest water well (USGS-14849) is about 1.25 miles north of the Moonwalk SWD location. Depth to water was recorded as 400 feet in 1912. At USGS-15080, less than 0.25 miles further north, the depth to water was 478 feet in 1976.

About 1.8 miles to the northwest is C-03851 with a depth to water of 713 feet in 2015.

Southwest of the Moonwalk SWD is C-03555 with a depth to water of 380 feet in 2013. MISC-12 is 1.8 miles southeast of the Moonwalk SWD with a depth to water of 198.2 feet in 1970. C-02337 and USGS-14813 are 1.75 miles and 2.0 miles east of the Moonwalk SWD respectively. There is no data for either of these wells.

The data suggests that C-03851 (to the northwest) accesses water at greater depth from the Rustler formation while the other wells access water within the Chinle formation.

The location of nearby mapped surface water bodies are shown in Plate 4. There are three Lake/Ponds between 2.25 miles and 2.5 miles from the proposed SWD. Two are southwest of the location and one is east-southeast.

In the area of the Moonwalk SWD, the depth interval of the Rustler is about 700-1000 feet bgs, according to the BLM and OCD. We agree with this assessment. The bottom of the Rustler Formation is characterized by evaporates (anhydrite) and is not considered an underground source of drinking water. Hence, the surface casing required by OCD to prevent impairment of fresh water will be from ground surface to an RKB depth of 1,655 feet at the proposed Moonwalk SWD.

IX. Describe the proposed stimulation program, if any

A cleanup acid job may be used to remove mud and drill cuttings from the formation. However, no other formation stimulation is currently planned.

*X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted)

Logs will be submitted to OCD upon completion of the well.

<u>*</u>XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken

No analysis of the wells described above in Section VIII is available. Data from various sources permit a conclusion that groundwater within the Chinle Formation is potable. In this area, groundwater in the underlying Rustler formation may be relatively brackish.

XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water

Randall T. Hicks, a Professional Geologist with decades of experience in hydrogeology, affirms, on behalf of Solaris Water Midstream, that

- The USGS has mapped quaternary faults in New Mexico and no such faults are mapped in the area of the proposed Moonwalk Fed SWD 1¹
- The Texas Bureau of Economic Geology has mapped older faults (e.g. basement and Woodford) in New Mexico and the closest mapped fault is about 8 miles to the east²

¹ https://usgs.maps.arcgis.com/apps/webappviewer/index.html?id=5a6038b3a1684561a9b0aadf88412fcf

- With respect to migration of produced water from the injection zone to underground sources of drinking water via faults or other natural conduits, the following conditions were considered
 - The lowest underground source of drinking water is the middle and upper Rustler Formation.
 - About 15,000 feet of sedimentary rock separates the bottom of the Rustler Formation and the top of the injection zone. Many of the formations that lie between the injection zone and the lowermost aquifer are permeable and contain oil, gas or water at various pressures. Any excursion of injected fluids from the Devonian disposal zone would undoubtedly enter these permeable formations prior to moving through the 3000-foot lowpermeability salt zone that underlies the Rustler Formation.
 - There is no evidence that the pressure regime in the oil and gas reservoirs is sufficient to cause the upward migration of formation water through the bedded salt and into the Rustler or Chinle aquifers.
- There is no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water

² Bureau of Economic Geology (Accessed April 2019). University of Texas at Austin. Basement Faults (Ewing 1990, Tectonic Map of Texas); Precambrian Faults (Frenzel et al. 1988, Figure 6); Woodord Faults (Comer 1991, plate 1). <u>Http://www.beg.utexas.edu/resprog/permianbasin/gis.htm</u>

XIII.Applicants must complete the "Proof of Notice" section on the reverse side of this form.

Plates

- Plate 1 OCD wells within the area of review
- Plate 2 Mineral leases within the area of review
- Plate 3 Water supply wells within the area of review
- Plate 4 Surface water within the area of review

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Note: Some features not present in map extent.