ibmit I Copy To Appropriate District	State of New Mexico			Form C-103
se xrict 1 − (575) 393-6161	Energy, Minerals and Natural Re	sources	R	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240	RECEMED		WELL API NO.	
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIV	ISION	30-015-23728	
District III + (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	MAR 029 02820 uth St. Francis E)r.	5. Indicate Type of Leas	
District IV - (505) 476-3460	Santa Fe, NM 87505		6. State Oil & Gas Lease	
1220 S. St. Francis Dr., Santá Fe, NM 2008 87505	NKU-UCUARIESIA		N/A	,
(DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLUG BAC ATION FOR PERMIT" (FORM C-101) FOR SUC	СК ТО А Н	7. Lease Name or Unit A DORSTATE SWD	greement Name
	Gas Well 🔲 Other <u>SWD</u>		8. Well Number 1	
2. Name of Operator			9. OGRID Number	
PERMIAN WATER SOLUTIONS.	LLC		373626	
3. Address of Operator			10. Pool name or Wildca	at
600 TRAVIS ST., SUITE 4700,	HOUSTON TX 77002		SWD; BONE SPRING	
4. Well Location				
Unit Letter: H	<u>1980</u> feet from the <u>NORTH</u> I	line and <u>660</u>	feet from the EAST line	
/ Section 27		e 28 E	NMPM	EDDY County
	11. Elevation (Show whether DR, RKB, 2968' GL	RT, GR, etc.)		
NOTICE OF INT PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: 13. Describe proposed or comple of starting any proposed wor proposed completion or reco Plan to P&A as follows. MIRU p depending on psi. Once well is After pkr is released and well is x/over & csg scraper, and RIH back to GL. If test fails, RIH w	PLUG AND ABANDON A REM CHANGE PLANS COM MULTIPLE COMPL CASI The doperations. (Clearly state all pertinent eted operations. (Clearly state all pertinent k). SEE RULE 19.15.7.14 NMAC. For impletion. bulling unit. Check wellhead psi. If stable, un-flange well head and to dead, POOH w/ tbg & pkr and LD to tag CIBP @ 3680'. Circulate h v/ pkr and find leak. After leak is	SUBS EDIAL WORE IMENCE DRII ING/CEMENT ER: nt details, and Multiple Con pressured try to oper o all equipm to le volume s found, ge	SEQUENT REPORT ALTER LLING OPNS. PAND T JOB I give pertinent dates, incluind npletions: Attach wellbore up, then try to kill with the bypass on AS 1X pk thent. PU 2.375" work is the twice to clean up & the twice to clean up & the tapproval from OCD	RING CASING A DA DA DA DA DA DA DA DA DA
isolate and PB to GL. If test of	n 2 nd plug is good, notify OCD an	nd det plug	recommendation to I	P&A back to GL.
	s been approved by OCD, schedule			
	II P&A marker. See attached curre		a a a a luvia il la ava alla ava	
	Use This	forma	t B	MS. Ry up Pull Tby NIH + Tay TM
.				
Spud Date:	Die Delanes Deter			
	Rig Release Date:			
	_			
I hereby certify that the information a	bove is true and complete to the best of n	ny knowledge	and belief	
7111	7			
SIGNATURE D'UNE	TITLE CONSULTA	NT	DATE 1-2	27-20

Type or print name <u>BRIAN WOOD</u> For State Use Only DENIED

TITLE <u>CONSULTANT</u>

TITLE

E-mail address: brian@permitswest.com

DENIED

DATE <u>1-27-20</u>

PHONE: 505 466-8120

GC DATE 3 13/20

APPROVED BY:_____ Conditions of Approval (if any): //