| Submit 1 Copy To Appropriate District Office | State of 1 | | | Form (| C-103 | | |
|--|--|-----------------------|---------------------------------------|---------|--------------------------------|---------------|------|
| District I – (575) 393-6161 | Energy, Minerals | and Natural | Resources | | R | evised July 1 | |
| 1625 N. French Dr., Hobbs, NM 88240 | | | | | API NO. | | |
| <u>District II</u> – (575) 748-1283 | OIL CONGERN | ATIONED | I II II I I I I I I I I I I I I I I I | | 30-025-47 | 587 | |
| 811 S. First St., Artesia, NM 88210 | OIL CONSERV | | | 5 Indi | cate Type of Lease | | |
| District III = (505) 334-6178 | 1220 South | St. Francis | s Dr. | I | | _ | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa Fe | , NM 8750 | 5 | | | FEE | |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM | Santa 1 c | , 1111 0750 | 5 | 2.1 | e Oil & Gas Lease | | |
| 87505 | | | | VC-0' | 763; VC-0164; VC | C-9002; VC- | 9138 |
| (DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC | CES AND REPORTS ON ALS TO DRILL OR TO DEEF ATION FOR PERMIT" (FORM | EN OR PLUG I | BACK TO A UCH | 7. Leas | se Name or Unit A ALPHA DOG | _ | ame |
| PROPOSALS.) | C W-11 | | | 8 Wel | l Number | | |
| 1. Type of Well: Oil Well | Gas Well Other | | | 0. 1701 | 001H | | |
| 2. Name of Operator | | | | 0.001 | | | |
| • | ndand Onesette a NIM LT | 0 | | 9. UGI | RID Number | | |
| | ndard Operating NM LL | C | | | 329818 | | |
| 3. Address of Operator | | | | 10. Po | ol name or Wildca | t | |
| 3300 North | A Street Midland, TX 79 | 705 | | WC-0 | 25 G-09 S1736101 | P; UPPER P | ENN |
| 4. Well Location | | | | • | | | |
| Unit Letter P : 10 | 000feet from the | _SOUTH_ | line and | 330 | feet from the | EAST | line |
| Section 10 | Township 17S | Range | 36E | NMPM | County | Lea | _ |
| | 11. Elevation (Show wh | ether DR, RK 3845' | CB, RT, GR, | etc.) | | | |
| | | | | | | - 100 | |

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

| NOTICE OF IN | ITENTION TO: | | SUBSEQUENT RE | PORT OF: | |
|----------------------------|----------------|-------------|--|-------------------|----------|
| PERFORM REMEDIAL WORK | | | REMEDIAL WORK | ALTERING CASING [| |
| TEMPORARILY ABANDON | CHANGE PLANS | | COMMENCE DRILLING OPNS. | P AND A | \Box |
| PULL OR ALTER CASING | MULTIPLE COMPL | | CASING/CEMENT JOB | | |
| DOWNHOLE COMMINGLE | | | | | |
| CLOSED-LOOP SYSTEM OTHER: | Cancel Permit | \boxtimes | OTHER: | _ | _ |
| | | | pertinent details and give newtinent det | | <u> </u> |

osed 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.

| (DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA PROPOSALS.) 1. Type of Well: Oil Well G 2. Name of Operator Texas Star 3. Address of Operator | as Well Other Odard Operating NM LLC | tural Resources N DIVISION ancis Dr. 37505 | 5. Indicate Type of STATE STATE 6. State Oil & Gas VC-0763; VC-016 7. Lease Name or ALPHA 8. Well Number 9. OGRID Number 10. Pool name or V | Lease No. 54; VC-9002; VC-9138 Unit Agreement Name DOG STATE 002H r 29818 Wildcat |
|--|--|--|--|--|
| 4. Well Location | A Street Midland, TX 79705 | | WC-025 G-09 S17 | 73610P; UPPER PENN |
| Unit Letter P : 10 | 00 feet from the SOUT | H line and | 994 feet from | the EAST line |
| Section 10 | Township 17S Rang | ge 36E N | MPM Cou | |
| | 11. Elevation (Show whether D. | R, RKB, RT, GR, etc., 347' | | |
| TEMPORARILY ABANDON | PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL Cancel Permit ted operations. (Clearly state al c). SEE RULE 19.15.7.14 NMA | REMEDIAL WOR COMMENCE DRI CASING/CEMENT OTHER: | LLING OPNS. F | ALTERING CASING P AND A including estimated date |
| Spud Date: N/A | Rig Release I | Date: N/A | | 77.70.01 |
| I hereby certify that the information ab | ove is true and complete to the | best of my knowledg | e and belief. | |
| SIGNATURETimothy M. F. For State Use Only | | Presiden: | | |
| For State Use Only APPROVED BY: | TITLE | | DAT | F |
| Conditions of Approval (if any): | IIIDD | | DAT | |

Submit 1 Copy To Appropriate District

1625 N. French Dr., Hobbs, NM 88240

1000 Rio Brazos Rd., Aztec, NM 87410

1220 S. St. Francis Dr., Santa Fe, NM

1. Type of Well: Oil Well

811 S. First St., Artesia, NM 88210

District I - (575) 393-6161

District II - (575) 748-1283

District III - (505) 334-6178

District IV - (505) 476-3460

PROPOSALS.)

| | - Cine | | | 003H | |
|--|---|---------------------|---|----------------------|--------|
| Name of Operator Texas Standard Operating NM LLC | | | 9. OGRID Number | | |
| 3. Address of Operator | nuaru Operating NM LLC | | 10 Pool name a | 329818 or Wildcat | |
| • | A Street Midland, TX 79705 | | 10. Pool name or Wildcat WC-025 G-09 S1736100; UPPER PENN | | |
| 4. Well Location | | | 110 023 0 07 | ST750100, OTTERT | EIVIV |
| Unit Letter O : 10 | on feet from the SOUTI | H line and | 1657 feet fr | om the EAST | line |
| Section 10 | Township 17S Range | | | County Lea | |
| | 11. Elevation (Show whether DR, | | | bounty Eta | Page 1 |
| | 384 | | | | |
| | | | | | |
| 12. Check A _l | ppropriate Box to Indicate N | ature of Notice, | Report or Othe | r Data | |
| NOTICE OF INT | ENTION TO: | SUB | SEQUENT RE | EDODT OF: | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WOR | | ALTERING CASIN | ic 🗆 |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRI | | P AND A | |
| PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMENT | | | |
| DOWNHOLE COMMINGLE | | | | | |
| CLOSED-LOOP SYSTEM | | | | | |
| | Cancel Permit Eted operations. (Clearly state all | OTHER: | | | |
| of starting any proposed wor | k). SEE RULE 19.15.7.14 NMA | For Multiple Cor | uplations: Attach | wallhara diagram of | : |
| | | | | | |
| oud Date: N/A | Rig Release Da | nte: N/A | | | |
| hereby certify that the information al | bove is true and complete to the be | est of my knowledge | e and belief. | | |
| GNATURE Jing M | John TITLE Pro | sident | D | ATE1/20/2 | 1 |
| ype or print nameTimothy M. I or State Use Only | Roberson E-mail address: | tim@txsoil.c | comPH | ONE:713-655-1 | 195 |
| PPROVED BY: | TITI F | | D | ATE | |
| onditions of Approval (if any): | | | D. | CLI L | |
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State of New Mexico

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS

Gas Well Other

(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

Form C-103

Revised July 18, 2013

30-025-47589

VC-0763; VC-0164; VC-9002; VC-9138

7. Lease Name or Unit Agreement Name

ALPHA DOG STATE

FEE

WELL API NO.

8. Well Number

5. Indicate Type of Lease

STATE 🖂

6. State Oil & Gas Lease No.

Submit 1 Copy To Appropriate District

District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240

| District II - (575) 748-1283 | OIL CONGERY | A TIONI | DIMICION | | 30-025-47 | 590 | - |
|---|---|------------------------|-------------------------|--------------|----------------|---------------------|--------|
| 811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 | OIL CONSERVA | | | 5. Indicate | Type of Leas | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South | | | STA | | FEE | |
| District IV – (505) 476-3460 | Santa Fe, | NM 87 | 505 | | & Gas Lease | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | VC-0763; | VC-0164; VC | C-9002; VC-91 | 38 |
| SUNDRY NOT | ICES AND REPORTS ON | WELLS | 77.1 | 7. Lease Na | ame or Unit A | greement Nam | ne l |
| (DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR, USE "APPLIPROPOSALS.) | OSALS TO DRILL OR TO DEEPE ICATION FOR PERMIT" (FORM | EN OR PLU C-101) FO | JG BACK TO A PR SUCH | | ALPHA DOG | | |
| 1. Type of Well: Oil Well | Gas Well Other | | | 8. Well Nu | mber 004H | | |
| 2. Name of Operator Texas S | tandard Operating NM LLC | | | 9. OGRID | Number 329818 | 3 | |
| 3. Address of Operator | | | | 10. Pool na | me or Wildca | | |
| 3300 Nort | th A Street Midland, TX 797 | 705 | | WC-025 G | G-09 S173610 | 0; UPPER PEN | NN |
| 4. Well Location | | | • | | | | ile e |
| Unit LetterO:_ | feet from the | SOUTH | I line and | _2321fe | eet from the _ | EAST | line |
| Section 10 | Township 17S | Range | | ИРM | County | Lea | |
| | 11. Elevation (Show whe | ther DR, 385 | | | | | |
| | | | <u> </u> | | | Constitution of the | |
| 12 Check | Appropriate Box to Ind | ionto M | ntura of Notice I | Danaut au C | Othon Doto | | |
| 12. Check | Appropriate box to mu | icate iva | atule of Notice, i | Report or C | Jiner Data | | |
| NOTICE OF IN | NTENTION TO: | | SUBS | SEQUENT | REPORT | OF: | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | | REMEDIAL WORK | | | RING CASING | |
| TEMPORARILY ABANDON | CHANGE PLANS | | COMMENCE DRIL | | . P AND | Α | |
| PULL OR ALTER CASING | MULTIPLE COMPL | | CASING/CEMENT | JOB | | | |
| DOWNHOLE COMMINGLE | | | | | | | |
| CLOSED-LOOP SYSTEM OTHER: | Cancel Permit | | OTHER: | | | | |
| 13. Describe proposed or com | | | | give pertine | nt dates inclu | ding actimated | L data |
| of starting any proposed w | ork). SEE RULE 19.15.7.1 | 4 NMAC | For Multiple Com | pletions: At | tach wellbore | diagram of | date |
| proposed completion or re | | | 1 | 1000 | | | |
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| Spud Date: N/A | Rig Re | elease Da | te: N/A | | | | 7 |
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| I hereby certify that the information | above is true and complete | to the be | st of my knowledge | and belief. | | | |
| | • | | , , | | | | Š |
| SIGNATURE Jimety | 1. Rober_TITLE | P | resident | | DATE | 1/20/21_ | 725 |
| Type or print name Timothy N | A Poharson Daniella | ddn===: | Atmos to | | DITONE | 710 666 115 | _ |
| For State Use Only | 1. Roberson E-mail a | aaress: _ | tim@txsoil.c | om | PHONE: | 713-655-1195 | 5 |
| | | | | | | | |
| APPROVED RV | יייי די | ; | | | D A TIT | | |
| APPROVED BY: Conditions of Approval (if any): | TITLE | E | | | DATE | | |
| Conditions of Approval (if any): | TITLE | Ε | | | DATE | | 2 |

State of New Mexico Energy, Minerals and Natural Resources

Form C-103 Revised July 18, 2013

WELL API NO.

Submit I Copy To Appropriate District Office

<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240

<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210

District III - (505) 334-6178

| 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa Fe, NM 87505 | STATE S FEE |
|--|--|---|
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM | Sama Pe, Nivi 87505 | 6. State Oil & Gas Lease No. VC-9002; VC-9138 |
| 87505 | ICES AND REPORTS ON WELLS | |
| (DO NOT USE THIS FORM FOR PROPO | ICES AND REPORTS ON WELLS DISALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH | 7. Lease Name or Unit Agreement Name ALPHA DOG STATE |
| 1. Type of Well: Oil Well | Gas Well Other | 8. Well Number 005H |
| 2. Name of Operator | | 9. OGRID Number |
| | tandard Operating NM LLC | 329818 |
| 3. Address of Operator 3300 Nort | h A Street Midland, TX 79705 | 10. Pool name or Wildcat WC-025 G-09 S173622C; UPPER PENN |
| 4. Well Location | | |
| Unit LetterC:_ | | 2316feet from theWESTline |
| Section 22 | Township 17S Range 36E | NMPM County Lea |
| | 11. Elevation (Show whether DR, RKB, RT, GR, 3846' | etc.) |
| | | |
| 12. Check | Appropriate Box to Indicate Nature of Noti | ice, Report or Other Data |
| NOTICE OF IN | NTENTION TO: | UBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK \square | PLUG AND ABANDON ☐ REMEDIAL W | |
| TEMPORARILY ABANDON | | DRILLING OPNS. P AND A |
| PULL OR ALTER CASING DOWNHOLE COMMINGLE | MULTIPLE COMPL CASING/CEN | MENT JOB |
| CLOSED-LOOP SYSTEM | , K | |
| OTHER: | Cancel Permit | |
| 13. Describe proposed or comp | pleted operations. (Clearly state all pertinent details | s, and give pertinent dates, including estimated date |
| of starting any proposed war proposed completion or rec | ork). SEE RULE 19.15.7.14 NMAC. For Multiple | Completions: Attach wellbore diagram of |
| proposed completion of rec | completion. | |
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| pud Date: N/A | Rig Release Date: N/A | |
| pad Bate. | Rig Release Date. | |
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| hereby certify that the information | above is true and complete to the best of my know | ledge and belief. |
| 1: 44 | | |
| IGNATURE | Rober THILE Presiden; | DATE1/20/21 |
| | 1. Roberson E-mail address:tim@txs | |
| or State Use Only | | |
| APPROVED BY: | TITLE | DATE |
| Conditions of Approval (if any): | | |
| | | |
| | | |

State of New Mexico

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Form C-103

Revised July 18, 2013

30-025-47591

WELL API NO.

5. Indicate Type of Lease

STATE 🖂

| Submit 1 Copy To Appropriate District Office District I = (575) 393-6161 | State of New Mexico Energy, Minerals and Natural Resources | Form C-103 Revised July 18, 2013 |
|--|--|--|
| 1625 N. French Dr., Hobbs, NM 88240 | | WELL API NO. |
| <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 | OIL CONSERVATION DIVISION | 30-025-47592 |
| <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | 5. Indicate Type of Lease STATE FEE FEE |
| <u>District IV</u> – (505) 476-3460 | Santa Fe, NM 87505 | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | VC-9002; VC-9138 |
| (DO NOT USE THIS FORM FOR PROP | TICES AND REPORTS ON WELLS OSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ICATION FOR PERMIT" (FORM C-101) FOR SUCH | 7. Lease Name or Unit Agreement Name ALPHA DOG STATE |
| 1. Type of Well: Oil Well | Gas Well Other | 8. Well Number |
| 2. Name of Operator | | 9. OGRID Number |
| Texas S | Standard Operating NM LLC | 329818 |
| 3. Address of Operator | A Co. A Malla Latty gogge | 10. Pool name or Wildcat |
| | th A Street Midland, TX 79705 | WC-025 G-09 S173622C; UPPER PENN |
| 4. Well Location Unit Letter C: | 200 feet from the NORTH line and | 1652 fort formal INFORT II |
| Unit LetterC:_ Section 22 | _300feet from theNORTH line and _ Township 17S Range 36E | 1653feet from theWESTline NMPM County Lea |
| Section 22 | 11. Elevation (Show whether DR, RKB, RT, GR, | |
| | 3848' | |
| | PLUG AND ABANDON ☐ REMEDIAL W CHANGE PLANS ☐ COMMENCE | UBSEQUENT REPORT OF: ORK |
| DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM | | IENT JOB |
| OTHER: 13. Describe proposed or com | Cancel Permit OTHER: upleted operations. (Clearly state all pertinent details. | and give pertinent dates including estimated date |
| of starting any proposed w | vork). SEE RULE 19.15.7.14 NMAC. For Multiple | Completions: Attach wellbore diagram of |
| proposed completion or re | completion. | |
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| 21/4 | | |
| Spud Date: N/A | Rig Release Date: N/A | |

I hereby certify that the information above is true and complete to the best of my knowledge and belief. DATE 1/20/21 Type or print name _ For State Use Only ______tim@txsoil.com____ PHONE: ___713-655-1195 APPROVED BY: Conditions of Approval (if any): TITLE DATE

Released to Imaging: 1/25/2021 10:34:16 AM

Submit I Copy To Appropriate District

1625 N. French Dr., Hobbs, NM 88240

1000 Rio Brazos Rd., Aztec, NM 87410

1220 S. St. Francis Dr., Santa Fe, NM

811 S. First St., Artesia, NM 88210

District I - (575) 393-6161

District II - (575) 748-1283

District III - (505) 334-6178

District IV - (505) 476-3460

PROPOSALS.)

| 1. Type of Well: Oil Well | Gas Well Other | | 8. Well Number | г 007Н | | |
|--|--|--------------------------------|--------------------|-----------|------------|------|
| 2. Name of Operator | andard Operating NM LLC | | 9. OGRID Num | ıber | | |
| 3. Address of Operator | andard Operating NW LLC | | 10. Pool name o | 329818 | | |
| • | A Street Midland, TX 79705 | | WC-025 G-09 | | | PENN |
| 4. Well Location | 420 0 0 0 0 00 000 | | | | | |
| Unit LetterL:1 Section 22 | 420 feet from the SOUT Township 17S Rang | | 992feet from | | _WEST | line |
| Section 22 | 11. Elevation (Show whether DF | | | County | Lea | |
| | 38 | 48' | | | | |
| 12. Check A | Appropriate Box to Indicate N | Nature of Notice, | Report or Othe | r Data | | |
| NOTICE OF IN | TENTION TO: | SUB | SEQUENT RE | EPORT | OF: | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WOR | | | RING CASIN | 1G □ |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRI | LLING OPNS. | P AND | | |
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| DOWNHOLE COMMINGLE | | | | | | |
| CLOSED-LOOP SYSTEM | 0 | | | | | |
| OTHER: | Cancel Permit | OTHER: | | | | |
| Describe proposed or comp of starting any proposed we proposed completion or rec | ork). SEE RULE 19.15.7.14 NMA ompletion. | C. For Multiple Co. | impletions. Attach | | | ī |
| of starting any proposed wo | ork). SEE RULE 19.15.7.14 NMA ompletion. | C. For Multiple Con | impletions. Attach | | | |
| of starting any proposed we proposed completion or rec | rk). SEE RULE 19.15.7.14 NMA ompletion. Rig Release D | N/A | inpletions. Attach | | | |
| of starting any proposed we proposed completion or recompletion of recompletion of the proposed was proposed completion or recompletion or recompletion of the proposed was proposed we have a proposed wer | Rig Release D | Date: N/A | | | | |
| of starting any proposed we proposed completion or recompletion or recompleted pud Date: N/A hereby certify that the information | Rig Release D | Date: N/A | e and belief. | DATE | 1/20/2 | |
| of starting any proposed we proposed completion or rec | Rig Release Dabove is true and complete to the backs of t | Date: N/A | e and belief. | | | 1 |
| of starting any proposed we proposed completion or recompletion or recompleted pud Date: N/A hereby certify that the information IGNATURE Timothy M | Rig Release Dabove is true and complete to the backs of t | Date: N/A Dest of my knowledg | e and belief. | DATE | 1/20/2 | 1 |

State of New Mexico

Energy, Minerals and Natural Resources

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

Form C-103

Revised July 18, 2013

30-025-47593

VC-0555; VC-9002; VC-9138 7. Lease Name or Unit Agreement Name

ALPHA DOG STATE

STATE FEE

WELL API NO.

5. Indicate Type of Lease

6. State Oil & Gas Lease No.

Submit I Copy To Appropriate District

1625 N. French Dr., Hobbs, NM 88240

1000 Rio Brazos Rd., Aztec, NM 87410

1220 S. St. Francis Dr., Santa Fe, NM

1. Type of Well: Oil Well

811 S. First St., Artesia, NM 88210

District I - (575) 393-6161

District II - (575) 748-1283

District III - (505) 334-6178

District IV - (505) 476-3460

2. Name of Operator

| Address of Operator | | | 10 0 1 | | | |
|---|-----------------------------------|------------------|-----------------|--------------------------------|---------------------|--------------|
| 3. Address of Operator 3300 North A Street Midland, TX 79705 | | | | name or Wildca G-09 S173622 | | DENINI |
| l. Well Location | diana, 177 17105 | | WC-023 | | L, UPPEK I | EININ |
| | from the SOU | TU line and | 220 | C 41 | WEGE | 1. |
| Section 22 Towns | | | | eet from the | WEST | line |
| | hip 17S Ran on (Show whether D | | NMPM etc.) | County | Lea | |
| 11. Dievati | | 849' | eic.) | | | |
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| 12. Check Appropriate | Box to Indicate | Nature of Noti | ce, Report or | Other Data | | |
| NOTICE OF INTENTION | TO: | Ī cı | | UT DEDOD | . 05. | |
| | ABANDON 🗆 | REMEDIAL W | | NT REPORT | I OF: RING CASIN | IG \square |
| FEMPORARILY ABANDON ☐ CHANGE F | | 1 | DRILLING OP | | | |
| PULL OR ALTER CASING | | CASING/CEM | | | | |
| DOWNHOLE COMMINGLE | | | | | | |
| CLOSED-LOOP SYSTEM | . 57 | | | | | _ |
| OTHER: Cancel Peri | | OTHER: | 1 | . 1 1 | 11 | |
| Describe proposed or completed operation of starting any proposed work). SEE RU | II F 10 15 7 14 NM | AC For Multiple | Completions | Attach wallham | iding estima | itea date |
| proposed completion or recompletion. | DEE 17.13.7.14 INIVI | AC. To Multiple | Completions. | Attacii weilbort | diagram of | |
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| nereby certify that the information above is true | and complete to the | best of my knowl | ledge and belie | f. | | |
| nereby certify that the information above is true | and complete to the | best of my knowl | ledge and belie | f. | | |
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| GNATURE Linky M. Role | TITLE / | President | 4 | DATE | | |
| GNATURE M. Apoleovype or print nameTimothy M. Roberson | TITLE / | President | 4 | DATE | | |
| GNATURE Linky M. Role | TITLE / | President | 4 | DATE | | |
| GNATURETimothy M. Roberson or State Use Only PPROVED BY: | TITLE / | President | coil.com | DATE PHONE: | | |
| GNATURETimothy M. Roberson or State Use Only | TITLEE-mail address | tim@txs | coil.com | DATE PHONE: | | |
| GNATURETimothy M. Roberson or State Use Only PPROVED BY: | TITLEE-mail address | tim@txs | coil.com | DATE PHONE: | | |
| GNATURETimothy M. Roberson or State Use Only PPROVED BY: | TITLEE-mail address | tim@txs | coil.com | DATE PHONE: | | |

State of New Mexico

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS

Gas Well Other

(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

Form C-103

Revised July 18, 2013

30-025-47594

VC-0555; VC-9002; VC-9138

ALPHA DOG STATE

008H

7. Lease Name or Unit Agreement Name

FEE

WELL API NO.

8. Well Number

9. OGRID Number

5. Indicate Type of Lease

STATE 🖂

6. State Oil & Gas Lease No.

<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720

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

1220 S. St Francis Dr., Santa Fe, NM 87505 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 15527

CONDITIONS OF APPROVAL

| Operator: | | OGRID: | Action Number: | Action Type: |
|--|---------------------|--------|----------------|--------------|
| TEXAS STANDARD OPERATING NM LL | 3300 North A Street | 329818 | 15527 | C-103C |
| Building One, Suite 105 Midland, TX79705 | | | | |

| OCD Reviewer | Condition |
|--------------|-----------|
| pkautz | None |