Diluted   CST   1938-161	eceived by OC. Office	Po Appropriate Bistrici	35:07 AM St.	ate of New Mo	exico		Form C-103 <sup>1</sup> of		
District 11-0757-98-128  JUST S, Finals, Ansels, M M6210 District 11-0757-98-128 District 11-0757-98-1	<u>District I</u> – (575	/	<i>C</i> 3 /	nerals and Nati	ural Resources	WELL ADINO	•		
Debased III (205) 334-6178   Santa Fe, NM 87505					I DIVIGION	WELL APINO. 3	0-015-38292		
Sontair Pice   Sol Strained   Santa Fe, NM 87505   Sol Strained   Sol	811 S. First St., Artesia, NM 88210 OIL CONS								
123 S. S. Finnels Dr. Same Fo. NM   S16900   S17905   SUNDRY NOTICES AND REPORTS ON WITLES   TO NOTICE THIS FORM FOR PROPOSALS TO DRELL OR TO DEFERS OR PLUG BACK TO A DEFERBENT RESERVOR. U.S.F. APPELATIRON FOR FERRITI' (FORM C-101) FOR SCCH   RDX 16   S. Well Number   010H   S. Well Number	1000 Rio Brazos Rd., Aztec, NM 87410								
SUNDRY NOTICES AND REPORTS ON WELLS   The proposed of the pr	1220 S. St. Fran	/			7303				
DON TO USE TILIS FORM FOR PROPOSALS TO DRILLO OR TO DEEPEN OR PLUG BACK TO A DEEPEN OR SUCH PROPOSALS)   S. Well Number   010H	87505	SUNDRY NO	OTICES AND REPO	RTS ON WELLS	<u> </u>				
1. Type of Well: Oil Well	DIFFERENT R	THIS FORM FOR PRO ESERVOIR. USE "AP	OPOSALS TO DRILL OR	TO DEEPEN OR PL	UG BACK TO A				
WPX Energy Permian, LLC   240289			Gas Well 🔲 Ot	ther		8. Well Number	010H		
WILDCAT G-03 \$263016K; BONE SPRING		•	•	•	LLC	9. OGRID Number	246289		
Unit Letter B : 330 feet from the Section 16 Township 26S Range 30E NMPM EDDY County    11. Elevation (Show whether DR, RRB, RT, GR, etc.)		TULSA, C	E WILLIAMS CENTER MD OK 74172	35					
Section 16 Township 26S Range 30E NMPM EDDY 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:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   COMMENCE DRILLING OPNS.   PAND A FEMALE AND COMMENCE ORILLING OPNS.   PAND A FEMALE AND COMMENCE ORICLING OPNS.   PAND A FEMALE AND CO		K	. 330 feet fro	m the NOR	TH line and	2110 feet from t	he EAST line		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3.094' GR  12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO: PERFORM REDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OPINS.   PAND A LITERING CASING   COMMENCE DRILLING OPINS   PAND A LITERING CASING   COMMENCE DRILLING OPINS   PAND A LITERING CASING   COMMENCE DRILLING OPINS   PAND A LITERING CASING   COMMENCE DRILLING OPINS A LITERING CASING   COMMENCE DRILLING OPINS   PAND A LITERING CASING   PAND A LITERIN									
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   CASING/CEMENT JOB   ALTERING CASING   ALTERING CASING   ALTERING CASING   ALTERING CASING   CASING/CEMENT JOB   ALTERING CASING   CASING/CEMENT JOB   ALTERING CASING   ALTERING CASING   ALTERING CASING   ALTERING CASING   CASING/CEMENT JOB   ALTERING CASING   ALTE			11. Elevation (S	how whether DR	R, RKB, RT, GR, etc		·		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   PLUG AND ABANDON   CHANGE PLANS   PAND A   PULL OR ALTER CASING   COMMENCE DRILLING OPNS.   PAND A   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   PAND A   POUL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   CASING/CEMENT JOB   CASING/CEMENT JOB   OTHER:  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.  12/05/20: SET 5-1/2" CIBP @ 7,500" (PER OCD); CIRC. WELL W/ M.L.F.; PRES. TEST CSG. X CIBP TO 500# - HELD OK. 12/06/20: PUMP 35 SXS. CMT. @ 7,500"; WOC X TAG TOC @ 7,198" (OK'D BY OCD); PUMP 25 SXS. CMT. @ 4,207"-4007" (PER OCD).  12/07/20: PERF. SQZ. HOLES @ 3,570"; ATTEMPT TO EST. INJ. RATE – PRES. UP TO 500# X HOLD; PUMP 25 SXS. CMT. @ 3,620" (PER OCD); WOC X TAG TOC @ 1,822" (OK'D BY OCD).  12/08/20: PERF. SQZ. HOLES @ 2,000" (PER OCD); ATTEMPT TO EST. INJ. RATE – PRES. UP TO 500# X HOLD; PUMP 25 SXS. CMT. @ 3,000" (PER OCD); WOC X TAG TOC @ 1,822" (OK'D BY OCD).  12/09/20: PERF. SQZ. 100 SXS. CMT. @ 1,000" (PER OCD); WOC X TAG TOC @ 803" (OK'D BY OCD); PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 300 SXS. CMT. @ 400"-3".  12/10/20: DIG OUT X CUT OFF WELLHEAD 3" B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER  Spud Date: 09/17/2012 Rig Release Date: 10/09/2012  Thereby certify that the information above is true and complete to the best of my knowledge of the property with Pugging under temp, wow armed states.m.n.e.  SIGNATURE				3,094	I' GR				
PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PAND A   PAND A   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   PAND A   PAN		12. Chec	k Appropriate Box	x to Indicate N	Nature of Notice	, Report or Other Da	ata		
PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PAND A   PAND A   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   PAND A   PAN		NOTICE OF	INTENTION TO	·	SUE	RSEQUENT REPO	ORT OF:		
PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM DITHER:  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.  12/05/20: SET 5-1/2" CIBP @ 7,500" (PER OCD); CIRC. WELL W/ M.L.F.; PRES. TEST CSG. X CIBP TO 500# - HELD OK. 12/06/20: PUMP 35 SXS. CMT. @ 7,500"; WOC X TAG TOC @ 7,198" (OK'D BY OCD); PUMP 25 SXS. CMT. @ 4,207"-4007" (PER OCD).  12/07/20: PERF. SQZ. HOLES @ 3,570"; ATTEMPT TO EST. INJ. RATE – PRES. UP TO 500# X HOLD; PUMP 25 SXS. CMT. @ 3,620" (PER OCD); WOC X TAG TOC @ 3,334" (OK'D BY OCD).  12/08/20: PERF. SQZ. HOLES @ 2,000" (PER OCD); ATTEMPT TO EST. INJ. RATE – PRES. UP TO 500# X HOLD; PUMP 25 SXS. CMT. @ 2,050" (PER OCD); WOC X TAG TOC @ 1,822" (OK'D BY OCD).  12/09/20: PERF. SQZ. HOLES @ 2,000" (PER OCD); WOC X TAG TOC @ 1,822" (OK'D BY OCD).  12/09/20: PERF. X SQZ. 109 SXS. CMT. @ 1,000" (PER OCD); WOC X TAG TOC @ 803" (OK'D BY OCD); PERF. X CIRC. TO SURF., FILLING ALL ANNULL, 300 SXS. CMT. @ 450"-3".  12/10/20; DIG OUT X CUT OFF WELLHEAD 3" B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULL; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER  Spud Date:  10/09/2012  1 hereby certify that the information above is true and complete to the best of my knowl receipt of C-03 Goldenguen Report of Well Plugging which may be found at COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate and not COV Web Page under form, www emediate	PERFORM F								
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:  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.  12/05/20: SET 5-1/2" CIBP @ 7,500' (PER OCD); CIRC. WELL W/ M.L.F.; PRES. TEST CSG. X CIBP TO 500# - HELD OK. 12/06/20: PUMP 35 SXS. CMT. @ 7,500'; WOC X TAG TOC @ 7,198' (OK'D BY OCD); PUMP 25 SXS. CMT. @ 4,207'-4007' (PER OCD).  12/07/20: PERF. SQZ. HOLES @ 3,570'; ATTEMPT TO EST. INJ. RATE – PRES. UP TO 500# X HOLD; PUMP 25 SXS. CMT. @ 3,620' (PER OCD); WOC X TAG TOC @ 3,334' (OK'D BY OCD).  12/08/20: PERF. SQZ. HOLES @ 2,000' (PER OCD); ATTEMPT TO EST. INJ. RATE – PRES. UP TO 500# X HOLD; PUMP 25 SXS. CMT. @ 1,000' (PER OCD); WOC X TAG TOC @ 1,822' (OK'D BY OCD).  12/09/20: PERF. SQZ. 100 SXS. CMT. @ 1,000' (PER OCD); WOC X TAG TOC @ 803' (OK'D BY OCD); PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 300 SXS. CMT. @ 450'-3'.  12/10/20; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER  Spud Date:  O9/17/2012  Rig Release Date:  10/09/2012  Thereby certify that the information above is true and complete to the best of my knowl  Approved for pugging of well bore cont, Usbilly, under bod is retained pending recept of C-101 [subsequent Report of Well Pugging) which may be found at COL Web Page under form, www emmediate m.m.s  SIGNATURE  TITLE  Regulatory Tech III  DATE  12/14/2020  PHONE: 539-573-3527  For State Use Only  APPROVED BY:  ATTILE  SEALW Manager  DATE  12/29/2020	<del></del>			<del></del>			AND A		
CLOSED-LOOP SYSTEM OTHER: OSTAIR OF STAIR OF STAI				MPL L	CASING/CEMEN	NT JOB $\square$			
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SXS. CMT. @ 2,050' (PER OCD); WOC X TAG TOC @ 1,822' (OK'D BY OCD).  12/09/20: PERF. X SQZ. 100 SXS. CMT. @ 1,000' (PER OCD); WOC X TAG TOC @ 803' (OK'D BY OCD); PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 300 SXS. CMT. @ 450'-3'.  12/10/20; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER  Spud Date:  O9/17/2012  Rig Release Date:  10/09/2012  Approved for plugging of well bore only. Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCC Web Page under Forms, www.emmrd.state.mm.us  SIGNATURE  TITLE Regulatory Tech III  DATE 12/14/2020  Type or print name  Caitlin O'Hair  E-mail address:  Caitlin.ohair@wpxenergy.com  PHONE:  539-573-3527  TITLE  Stall Manager  DATE 12/29/2020	_ ·	` ' '	~		/				
12/09/20: PERF. X SQZ. 100 SXS. CMT. @ 1,000' (PER OCD); WOC X TAG TOC @ 803' (OK'D BY OCD); PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 300 SXS. CMT. @ 450'-3'.  12/10/20; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER  Spud Date:  O9/17/2012  Rig Release Date:  10/09/2012  Approved for plugging of well bore only. Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emmed.state.nm.us  SIGNATURE  TITLE Regulatory Tech III  DATE 12/14/2020  E-mail address:  Caitlin.ohair@wpxenergy.com  PHONE:  539-573-3527  For State Use Only  APPROVED BY:  TITLE Staff Manager  DATE 12/29/2020							HOLD; PUMP 25		
SURF., FILLING ALL ANNULI, 300 SXS. CMT. @ 450'-3'.  12/10/20; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS. X INSTALL DRY HOLE MARKER  Spud Date:  O9/17/2012  Rig Release Date:  10/09/2012  Approved for plugging of well bore only. Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emrird.state.mm.us  SIGNATURE  TITLE Regulatory Tech III  DATE  12/14/2020  E-mail address:  Caitlin.ohair@wpxenergy.com  PHONE:  539-573-3527  For State Use Only  APPROVED BY:  APPROVED BY:  STATE Staff Manager  DATE  12/29/2020		O .	, ·	<u> </u>	`	,	ERF. X CIRC. TO		
PLATE TO CSGS. X INSTALL DRY HOLE MARKER  Spud Date: 09/17/2012 Rig Release Date: 10/09/2012  I hereby certify that the information above is true and complete to the best of my knowl receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emmrd.state.nm.us  SIGNATURE TITLE Regulatory Tech III DATE 12/14/2020  Type or print name Caitlin O'Hair E-mail address: caitlin.ohair@wpxenergy.com PHONE: 539-573-3527  For State Use Only  APPROVED BY: Approved for plugging of well bore only. Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emmrd.state.nm.us  Caitlin O'Hair E-mail address: Caitlin.ohair@wpxenergy.com PHONE: 539-573-3527	SURF., FILLING ALL ANNULI, 300 SXS. CMT. @ 450'-3'.								
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I hereby certify that the information above is true and complete to the best of my knowl  SIGNATURE  Caitlin O'Hair  E-mail address:  E-mail address:  TITLE  Staff Manager  DATE  Approved for plugging of well bore only. Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emnrd.state.nm.us  Caitlin O'Hair  E-mail address:  Caitlin.ohair@wpxenergy.com  PHONE:  539-573-3527  TITLE  Staff Manager  DATE  12/29/2020	TLA	TE 10 CSGS. A II	ISTALL DRT HOLE	MAKKEK					
I hereby certify that the information above is true and complete to the best of my knowl  SIGNATURE  Caitlin O'Hair  E-mail address:  E-mail address:  TITLE  Staff Manager  DATE  Approved for plugging of well bore only. Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emnrd.state.nm.us  Caitlin O'Hair  E-mail address:  Caitlin.ohair@wpxenergy.com  PHONE:  539-573-3527  TITLE  Staff Manager  DATE  12/29/2020	Smud Date:	09/17	/2012	Rig Release D	ate: 10/	/na/2n12	]		
SIGNATURE  Caitlin O'Hair  For State Use Only  APPROVED BY:  Title Staff Manager  DATE  Title Staff Manager  DATE  12/29/2020	Spaa Date.	03/11/	2012	rig release D	10/	03/2012	]		
SIGNATURE TITLE Regulatory Tech III  Type or print name  Caitlin O'Hair  For State Use Only  APPROVED BY:  TITLE  Staff Manager  DATE  12/14/2020  PHONE: 539-573-3527  TITLE  Staff Manager  DATE  12/29/2020	I le qualery a autit	State of the informati	ion above is two and	loto to the le	agt of my lm avil	Approved for plugging of well bore on	ly. Liability under bond is retained pending		
Type or print name Caltlin O'Hair  E-mail address: caltlin.ohair@wpxenergy.com PHONE: 539-573-3527  APPROVED BY: TITLE Staff Manager DATE 12/29/2020	i hereby certif	•		complete to the c	est of my knowl				
Type or print name Caltlin O'Hair  E-mail address: caltlin.ohair@wpxenergy.com PHONE: 539-573-3527  APPROVED BY: TITLE Staff Manager DATE 12/29/2020	SIGNATURE	(authin (	/ N/m	_ <sub>TITLE</sub> Reg	ulatory Tec				
APPROVED BY: Staff Manager DATE 12/29/2020	Type or print name Caltlin O'Hair E-mail address: caltlin.ohair@wpxenergy.com PHONE: 539-5/3-3527								
	For State Use	e Only							
			Colons	TITLE	Staff Mar	nager DATE	12/29/2020		

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

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**State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division** 1220 S. St Francis Dr. **Santa Fe, NM 87505** 

CONDITIONS

Action 11986

## **CONDITIONS OF APPROVAL**

Operator:			OGRID:	Action Number:	Action Type:
WPX ENERGY PERMIAN, LLC	3500 One Williams Center	Tulsa, OK74172	246289	11986	C-103P

OCD Reviewer	Condition
gcordero	None