

Submit 1 Copy To Appropriate District  
Office

District I – (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II – (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III – (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV – (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

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

Form C-103  
Revised July 18, 2013

|                                                                                                     |
|-----------------------------------------------------------------------------------------------------|
| WELL API NO.<br>30-025-01727                                                                        |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br>NM0435                                                              |
| 7. Lease Name or Unit Agreement Name<br>8910115850                                                  |
| 8. Well Number<br>111                                                                               |
| 9. OGRID Number<br>196069                                                                           |
| 10. Pool name or Wildcat<br>TEAS YATES-SEVEN RIVERS                                                 |

|                                                                                                                                                                                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p><b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br/>(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> |  |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other                                                                                                                 |  |
| 2. Name of Operator<br>MOMENTUM OPERATING CO., INC.                                                                                                                                                                   |  |
| 3. Address of Operator<br>P.O. BOX 2439 ALBANY, TEXAS 76430                                                                                                                                                           |  |
| 4. Well Location<br>Unit Letter <u>B</u> : 990 feet from the <u>NORTH</u> line and <u>2310</u> feet from the <u>EAST</u> line<br>Section <u>14</u> Township <u>20S</u> Range <u>33E</u> NMPM LEA County               |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3592                                                                                                                                                            |  |

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

| NOTICE OF INTENTION TO:                                   |                                           | SUBSEQUENT REPORT OF:                            |                                          |
|-----------------------------------------------------------|-------------------------------------------|--------------------------------------------------|------------------------------------------|
| PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>           | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>              | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>             | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>       |                                          |
| DOWNHOLE COMMINGLE <input type="checkbox"/>               |                                           |                                                  |                                          |
| CLOSED-LOOP SYSTEM <input type="checkbox"/>               |                                           |                                                  |                                          |
| OTHER: <input type="checkbox"/>                           |                                           | OTHER: <input type="checkbox"/>                  |                                          |

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.

- Remove current well head
- install a new well head
- test bradenhead

**Condition of Approval: notify  
OCD Hobbs office 24 hours  
prior of running MIT Test & Chart**

Spud Date:

12/19/1954

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE



TITLE Regulatory/Land Department

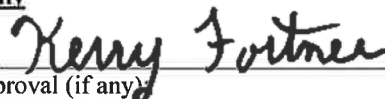
DATE 12/13/2021

Type or print name Megaen Birdwell

E-mail address: megaen@momentumoperating.com PHONE: 325-762-2366 x108

**For State Use Only**

APPROVED BY:



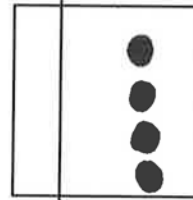
TITLE Compliance Officer A

DATE 12/28/21

Conditions of Approval (if any)

TEAS YATES UNIT #111  
WELLBORE AS OF 12/01/2021

TOP OF CEMENT



PERFORATED  
SQUEEZED  
453'-485'  
50 SKS

TOP OF SALT 1620'

TOP  
4 1/2" LINER  
2505' CEMENTED  
W/ 85 SKS

BASE OF SALT 2995'

PERFORATED, SQUEEZED  
2995' 100 SKS

PACKER

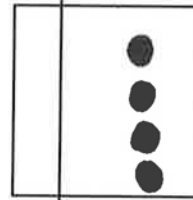
PACKER 3202'

5 1/2" CASING  
@3215' CEMENTED  
W/450 SKS

PERFORATIONS  
3224'- 3329'

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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 66683

CONDITIONS

|                                                                              |                                               |
|------------------------------------------------------------------------------|-----------------------------------------------|
| Operator:<br>MOMENTUM OPERATING CO INC<br>P. O. Box 2439<br>Albany, TX 76430 | OGRID:<br>196069                              |
|                                                                              | Action Number:<br>66683                       |
|                                                                              | Action Type:<br>[C-103] NOI Workover (C-103G) |

CONDITIONS

| Created By | Condition                      | Condition Date |
|------------|--------------------------------|----------------|
| kfortner   | Run MIT/BHT post workover test | 12/28/2021     |