

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. 30-025-28083
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. SWD 119
7. Lease Name or Unit Agreement Name State AJ
8. Well Number 1
9. OGRID Number 168776
10. Pool name or Wildcat Devonian

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 PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other

2. Name of Operator Basin Alliance, LLC

3. Address of Operator PO Box 1378 Hobbs, NM 88241

4. Well Location

Unit Letter G : 2310 feet from the North line and 2310 feet from the East line
Section 33 Township 18S Range 36E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3806

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: Tubing Change ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
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.

Basin Alliance, LLC, Operator of the above captioned well, requests approval to change tubing from 2-7/8" to 4-1/2". Operator will rig up and pull 2-7/8" tubing and packer, circulate clean, RIH with 4-1/2" tubing and packer, set and fill backside with packer fluid. Return well to active injection.

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

Spud Date:

Rig Release Date:

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

SIGNATURE Alex Jarrell TITLE Member DATE 2/8/2022

Type or print name: Alex Jarrell

E-mail address: Ajarrell@mesquiteservices.com

PHONE: 806-782-1894

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 3/27/23
Conditions of Approval: ...

District I
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CONDITIONS

Action 194522

CONDITIONS

Operator: BASIN ALLIANCE LLC P.O. Box 1378 Hobbs, NM 88241	OGRID: 168776
	Action Number: 194522
	Action Type: [C-103] NOI Workover (C-103G)

CONDITIONS

Created By	Condition	Condition Date
kfortner	Run PWOT MIT/NHT	3/27/2023