

Submit a 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

Form C-103
Revised July 18, 2013

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

WELL API NO. 30-025-06888
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Central Drinkard Unit
8. Well Number #162
9. OGRID Number 21355
10. Pool name or Wildcat Drinkard

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTION	
2. Name of Operator Southwest Royalties, Inc.	
3. Address of Operator P.O. Box 53570; Midland, Texas 79710	
4. Well Location Unit Letter <u>K</u> : <u>1980</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>29</u> Township <u>21S</u> Range <u>37E</u> NMPM Lea 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:		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.

1. RU to repair failed MIT
2. NU BOP, unseat injection packer, TOH.
3. R&R packer. Visually inspect PC tubing. Regardless of bad joints found or not, hydrotest PC tubing to 6000#. TIH with packer.
4. Leave packer swinging at current packer depth. Circulate packer fluid. Let it air out overnight. Notify NMOCD for witnessing next morning.
5. Run MIT chart 30 min to 500#.
6. Return well to injection as part of the Central Drinkard Unit waterflood.

I hereby certify that the information above is true and complete to the best of my know

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

SIGNATURE Lindsay Livesay TITLE Regulatory Analyst DATE 09/25/2023

Type or print name Lindsay Livesay E-mail address: llivesay@swrpermian.com PHONE: 432-207-3054

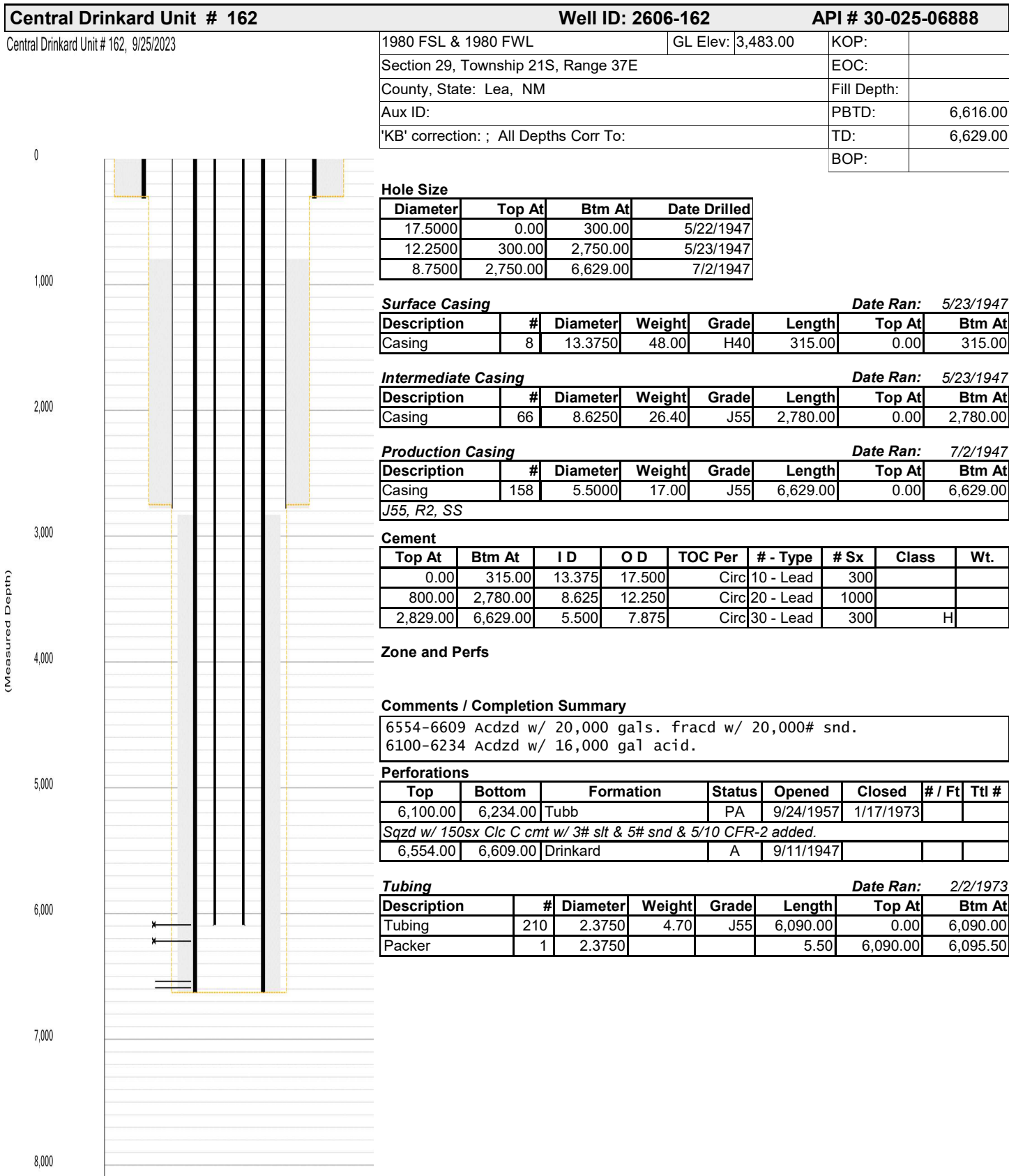
For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 9/25/23
Conditions of Approval (if any):

Wellbore Schematic

Printed: 9/25/2023

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

CONDITIONS

Action 268417

CONDITIONS

Operator: SOUTHWEST ROYALTIES INC P O BOX 53570 Midland, TX 79710	OGRID: 21355
	Action Number: 268417
	Action Type: [C-103] NOI Workover (C-103G)

CONDITIONS

Created By	Condition	Condition Date
kfortner	PWOT MIT/BHT	9/25/2023