

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. 30-025-35915
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 322734
7. Lease Name or Unit Agreement Name HOBBS STATE
8. Well Number #010
9. OGRID Number 373626
10. Pool name or Wildcat BSW; SALADO

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 BRINE WELL	
2. Name of Operator PERMIAN WATER SOLUTIONS, LLC	
3. Address of Operator PO BOX 2106 MIDLAND, TX 79702	
4. Well Location Unit Letter <u>F</u> : <u>2565</u> feet from the <u>NORTH</u> line and <u>2330</u> feet from the <u>WEST</u> line Section <u>29</u> Township <u>18S</u> Range <u>38E</u> NMPM	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3655 GR	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" 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. WIRELINE COMPANY TO RUN CBL. SUBMIT TO OCD TO APPROVE.
2. MOVE TO LOCATION, SPOT RIG, AND RELATED P&A EQUIPMENT.
3. CHECK WELL FOR PRESSURE, AND BLEED DOWN EXISTING PRESSURES.
4. SPOT FRAC TANK OR OPEN TOP RIG TANK TO CATCH CIRCULATED RETURNS.
5. ND TREE AND INSTALL BOP'S.
6. FILL BRINE CAVERN WITH BRINE WATER.
7. POOH W/ TBG & DOWNHOLE PUMP.
8. SCRAPE THE CASING
9. PU MECHANICAL SET CIBP & RIH & SET 50' AT 1650', 50' ABOVE CASING SHOE.
10. RUN MIT TEST AT 500 PSI FOR 30 MINUTES WITH CHART. REQUIRES 24 HR NOTIFICATION TO OCD.
11. MIX & CIRCULATE WELL 280 SX OF CLASS "C" CEMENT FROM TOP OF CIBP SETTING DEPTH TO SURF PUMPING A BALANCED PLUG TO SURF. FILL CASING W/ CLASS "C" CEMENT FROM PLUG TO SURFACE.
12. POOH W/ TBG & RIG DOWN RIG AND RELATED P&A EQUIPMENT.
13. CUT OFF WH 3' BGL & TOP WELL OFF W/ CMT.
14. SET ABANDONMENT MARKER (ABOVE GROUND PER NMAC 19.15), SUBMIT FINAL C-103 W/ CONSTRUCTION DETAILS WITHIN 30 DAYS OF WORK.
15. CLEAN LOCATION & MOVE OFF LOCATION W/ EQUIPMENT. JOB COMPLETE.

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 Jenni Usher TITLE REGULATORY ANALYST DATE 3/26/2024

Type or print name JENNI USHER E-mail address: JENNI@PERMIANWS.COM PHONE: 512-820-8772

**For State Use Only**

APPROVED

BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_ Conditions \_\_\_\_\_

of Approval (if any):

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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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
 COMMENCE DRILLING OPNS. ☐ P AND A ☐  
 CASING/CEMENT JOB ☐  
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Spud Date:

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

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Type or print name JENNI USHER E-mail address: JENNI@PERMIANWS.COM PHONE: 512-820-8772

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BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_ Conditions \_\_\_\_\_

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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

Form C-101  
Revised March 17, 1999

Submit to appropriate District Office  
State Lease - 6 Copies  
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

<sup>1</sup> Operator Name and Address H.R.C. P.O. Box 5102 Hobbs, NM 88241		<sup>2</sup> OGRID Number 131652
<sup>3</sup> Property Code 23612		<sup>4</sup> API Number 30-025-35915
<sup>5</sup> Property Name Hobbs State		<sup>6</sup> Well No. 10

<sup>7</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
F	29	18S	38E		2565	N	2330	W	Lea

<sup>8</sup> Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

<sup>9</sup> Proposed Pool 1

BSW: Salado

<sup>10</sup> Proposed Pool 2

<sup>11</sup> Work Type Code N	<sup>12</sup> Well Type Code M	<sup>13</sup> Cable/Rotary R	<sup>14</sup> Lease Type Code S	<sup>15</sup> Ground Level Elevation 3655.3
<sup>16</sup> Multiple NO	<sup>17</sup> Proposed Depth 1700	<sup>18</sup> Formation Salt	<sup>19</sup> Contractor Unknown	<sup>20</sup> Spud Date ASAP

<sup>21</sup> Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
12 1/4	9 5/8	28#	450	150 sx "11"	circulate
8 5/8	7	23#	1700	300 sx "11"	circulate
6 1/2	3.5 tubing	10.5	+ or - 2000		

<sup>22</sup> Describe the proposed program. If this application is to DEEPEN or PLUG BACK, give the data on the present production zone and proposed new productive zone.

Describe the blowout prevention program, if any. Use additional sheets if necessary.

Plan to drill a brine extraction well, will set 450' of 9 5/8" surface casing into the redbed and circulate cement to surface. Plan to run 7" casing to the top of the salt formation and cement it to surface. All cementing will be done by Halliburton. All casing tests and logs will be run as OCD requires. BOP Schematic attached.

Permit Expires 1 Year From Approval  
Date Unless Drilling Underway

<sup>23</sup> I hereby certify that the information given above is true and complete to the best of my knowledge and belief.		OIL CONSERVATION DIVISION	
Signature: <i>Eddie W. Seay</i>		Approved by: <i>Chris Williams</i>	
Printed name: Eddie W. Seay		Title:	
Title: Agent		Approval Date:	Expiration Date:
Date: 2/14/2002	Phone: (505) 392-2236	Conditions of Approval:	
		Attached <input checked="" type="checkbox"/>	

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State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised August 15, 2000  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

☐ AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number 30-025-35915		<sup>2</sup> Pool Code 96173		<sup>3</sup> Pool Name BSW Salado	
<sup>4</sup> Property Code 23613		<sup>5</sup> Property Name Hobbs State			<sup>6</sup> Well Number 10
<sup>7</sup> OGRID No. 131652		<sup>8</sup> Operator Name H. R. C. Inc.			<sup>9</sup> Elevation 3655.3

<sup>10</sup> Surface Location

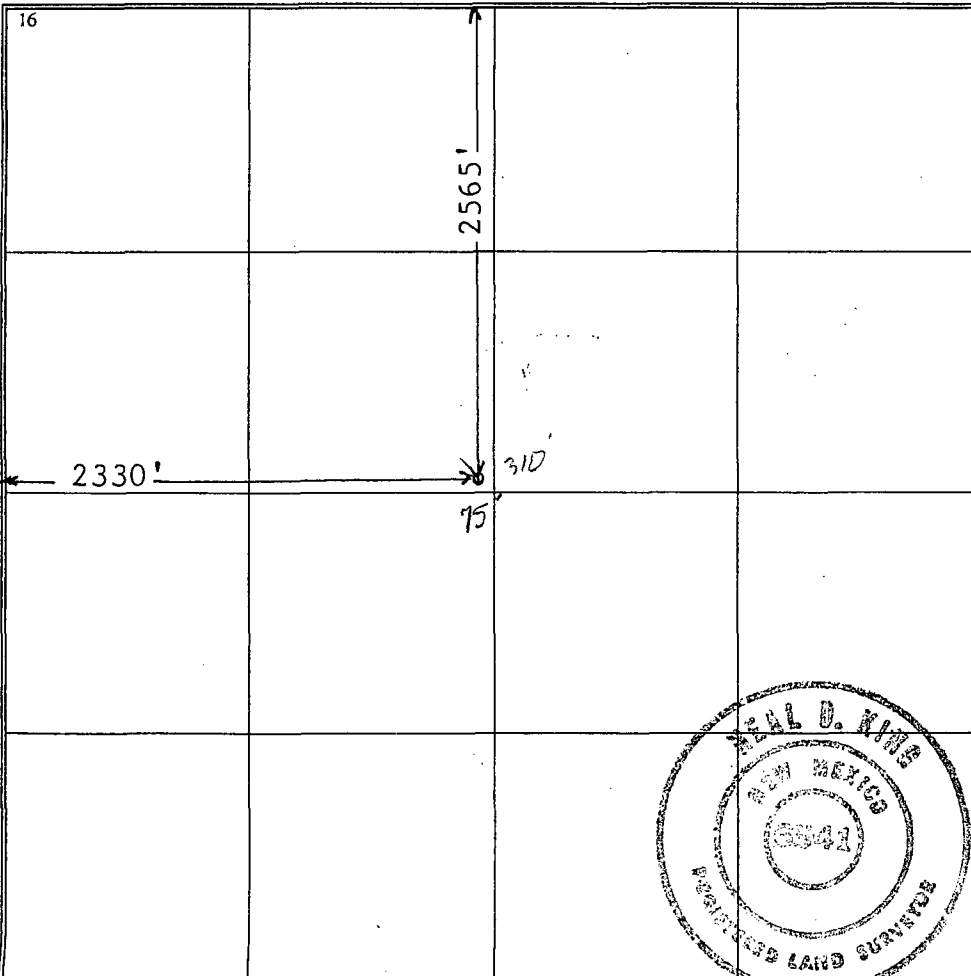
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
F	29	18S	38E		2565	North	2330	West	Lea

<sup>11</sup> Bottom Hole Location If Different From Surface

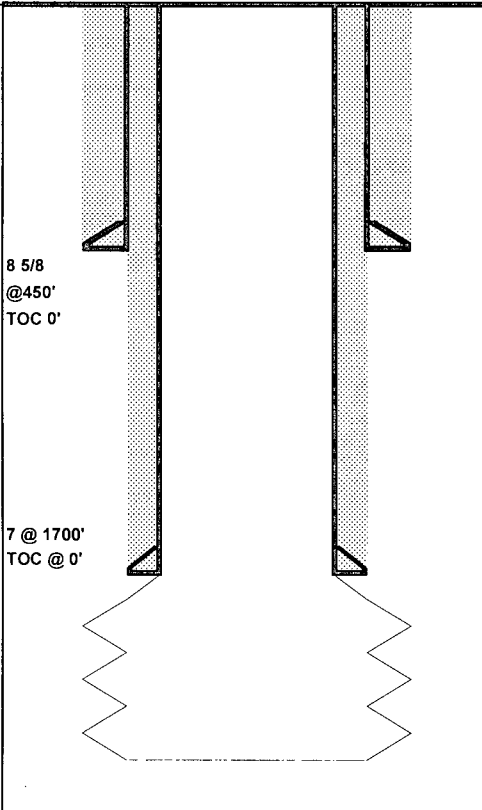
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

<sup>12</sup> Dedicated Acres 40	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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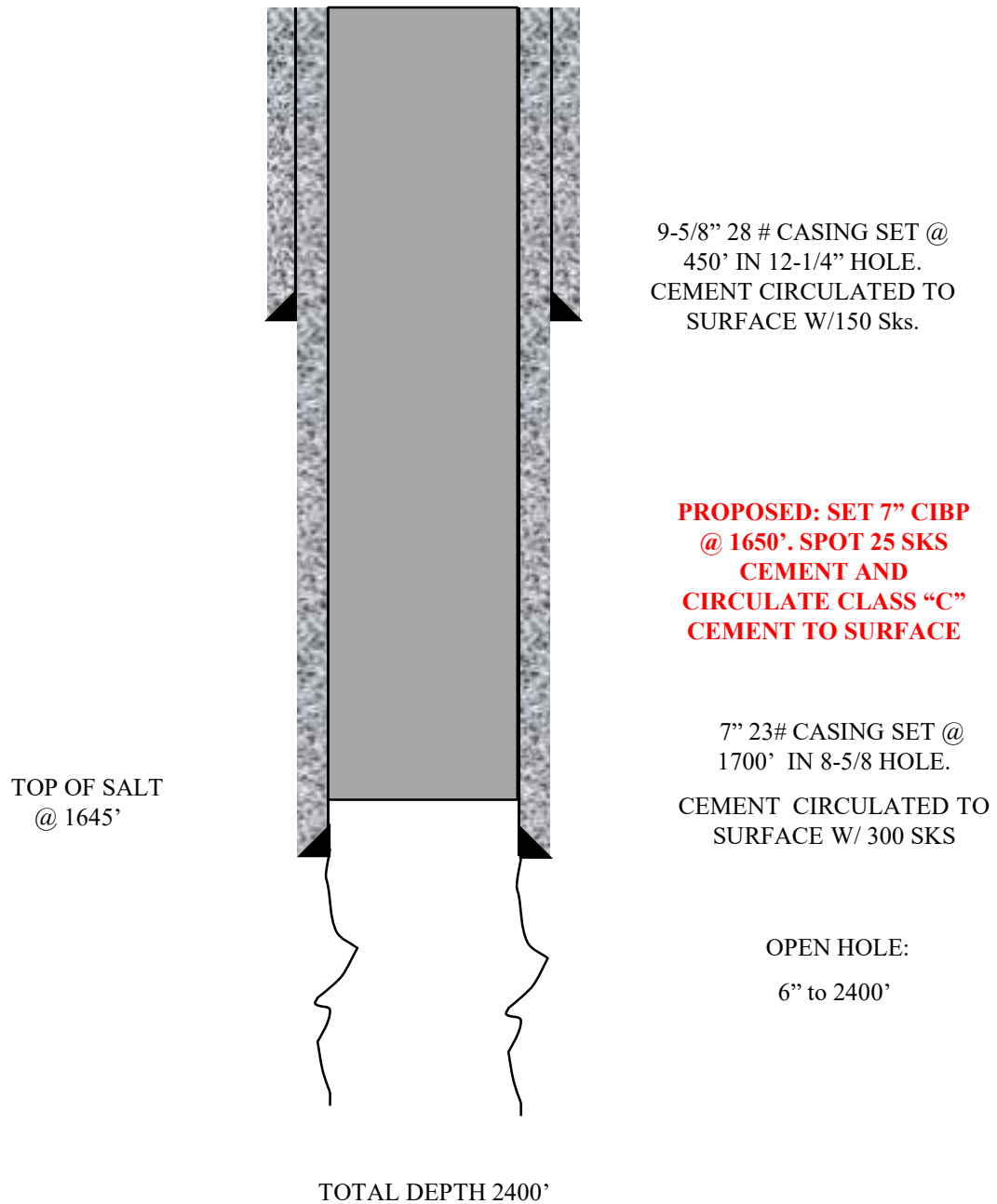
NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<div>16</div> 	<div>17 OPERATOR CERTIFICATION</div> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p><i>Gary M. Schubert</i></p> <p>Signature _____</p> <p>Printed Name _____</p> <p>Title _____</p> <p>Date 2/12/02</p>
	<div>18 SURVEYOR CERTIFICATION</div> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my belief.</p> <p>02-09-02</p> <p>Date of Survey _____</p> <p>Signature and Seal of Professional Surveyor: _____</p>
	<div>RECEIVED</div> <p>FEB 2002</p> <p>HOBBS</p> <p>OCD</p> <p>1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31</p>
	<div>Seal of the State of New Mexico</div> <p>REAL D. KING</p> <p>NEW MEXICO</p> <p>6541</p> <p>REGISTERED LAND SURVEYOR</p>
<div>Certificate Number</div> <p>6541</p>	

## WELLBORE SCHEMATIC AND HISTORY

COMPLETION SCHEMATIC		APINUM: 30-025-35915																																	
FORM	DEPTH	OPERATOR: LIQUID RESOURCES SERVICES, LLC																																	
 <p>8 5/8 @450' TOC 0'</p> <p>Rustler 1545</p> <p>Top Salt 1645 7 @ 1700' TOC @ 0'</p> <p>Base Salt 2400</p>		LEASENAME: HOBBS STATE		WELL NO. 10																															
		LOCATION: UL: F SEC: 29 TWN: 18S RNG: 38E		2565 FSL 2330 FEL																															
		TD		PBD	KB	DF																													
		GL																																	
		POOL BSW;SALADO		Open Hole 1700-2000																															
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PREPARED BY:				UPDATED 08/30/07																															

PROPOSED P&A  
WELLBORE SCHEMATIC  
ELEVATION 3655' GR



PERMIAN WATER SOLUTIONS, LLC

HOBBS STATE #010, BRINE WELL

Latitude 32.718647 Longitude -103.1716614

2565' FNL & 2330' FWL OF SEC 29 T18S R38E, LEA COUNTY, NEW MEXICO

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State of New Mexico  
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COMMENTS  
  
Action 326953

COMMENTS

Operator: Permian Water Solutions, LLC PO Box 2106 Midland, TX 79702	OGRID: 373626
	Action Number: 326953
	Action Type: [C-103] NOI Plug & Abandon (C-103F)

COMMENTS

Created By	Comment	Comment Date
cchavez	BW-30 Facility ID# fCJC2116260540 Closure Plan: Plug & Abandonment	3/28/2024

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cchavez	None	3/28/2024