

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

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.)		WELL API NO. 30-025-44386
1. Type of Well: Oil Well ☐ Gas Well ☒ Other Salt Water Disposal		5. Indicate Type of Lease STATE ☐ FEE ☒
2. Name of Operator GOODNIGHT MIDSTREAM PERMIAN, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 5910 North Central Expressway Suite 800 Dallas, TX 75206		7. Lease Name or Unit Agreement Name Ted 28 SWD
4. Well Location Unit Letter F : 2402 feet from the N line and 1911 feet from the W line Section 28 Township 21S Range 36E NMPM County Lea		8. Well Number #001
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,606' (GR)		9. OGRID Number 372311
		10. Pool name or Wildcat SWD; SAN ANDRES-GLORIETA

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	P AND A ☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐	
DOWNHOLE COMMINGLE ☐			
CLOSED-LOOP SYSTEM ☐			
OTHER: ☐		OTHER: Commencement of Injection ☒	

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.

Injection commenced on 9/17/2018.

Spud Date:

7/22/2018

Rig Release Date:

8/6/2018

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

SIGNATURE Amairany Green TITLE Legal Administrative Asst. DATE 04.04.2024

Type or print name Amairany Green E-mail address: amairany.green@goodnightmidstream.com PHONE: 214.347.4450

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

District I
1625 N. French Dr., Hobbs, NM 88240
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District III
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Phone:(505) 476-3470 Fax:(505) 476-3462

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Santa Fe, NM 87505

CONDITIONS

Action 327186

CONDITIONS

Operator: GOODNIGHT MIDSTREAM PERMIAN, LLC 5910 North Central Expressway Dallas, TX 75206	OGRID: 372311
	Action Number: 327186
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
mgebremichael	None	4/10/2024