

District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 District IV 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505	Form C-103 August 1, 2011 Permit 332599																																
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 NUMBER 30-015-49723																																
1. Type of Well: Oil		5. Indicate Type of Lease Private																																
2. Name of Operator Silverback Operating II, LLC		6. State Oil & Gas Lease No.																																
3. Address of Operator 19707 IH10 West Suite 201, San Antonio, TX 78256		7. Lease Name or Unit Agreement Name BOYD Y																																
4. Well Location Unit Letter <u>J</u> : <u>1860</u> feet from the <u>S</u> line and feet <u>2240</u> from the <u>E</u> line Section <u>14</u> Township <u>19S</u> Range <u>25E</u> NMPM _____ County <u>Eddy</u>		8. Well Number 102H																																
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3427 GR		9. OGRID Number 330968																																
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>																																		
Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____																																		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE OF PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> Other: _____ SUBSEQUENT REPORT OF: ALTER CASING <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> Other: <u>Perforations/Tubing</u> <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Perforated well from 3263'-8335' from 8/26/2022-9/3/2022. 9/10/2022 Ran and set tubing @ 2807'. Well SI and turn over to production Perforations Pool: N. SEVEN RIVERS; GLORIETA-YESO , 97565 Location: J -15-19S-25E 1550 S 2540 E <table border="1"><thead><tr><th>TOP</th><th>BOT</th><th>Open Hole</th><th>Shots/ft</th><th>Shot Size</th><th>Material</th><th>Stimulation</th><th>Amount</th></tr></thead><tbody><tr><td>3263</td><td>8335</td><td>N</td><td>6</td><td>0.42</td><td>SlickWater</td><td>Frac</td><td>9311872</td></tr><tr><td>3263</td><td>8335</td><td>N</td><td>6</td><td>0.42</td><td>Sand</td><td>Frac</td><td>9734086</td></tr></tbody></table> Tubing N. SEVEN RIVERS; GLORIETA-YESO , 97565 <table border="1"><thead><tr><th>Tubing Size</th><th>Type</th><th>Depth Set</th><th>Packer Set</th></tr></thead><tbody><tr><td>2.875</td><td>J-55</td><td>2807</td><td></td></tr></tbody></table>			TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount	3263	8335	N	6	0.42	SlickWater	Frac	9311872	3263	8335	N	6	0.42	Sand	Frac	9734086	Tubing Size	Type	Depth Set	Packer Set	2.875	J-55	2807	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines <input type="checkbox"/> a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/>																																		
SIGNATURE Type or print name	<u>Electronically Signed</u> <u>Matthew Alley</u>	TITLE E-mail address	<u>Chief Financial Officer</u> <u>malley@silverbackexp.com</u>	DATE Telephone No.	<u>3/20/2023</u> <u>303-513-0990</u>																													
For State Use Only:																																		
APPROVED BY:	<u>Patricia L Martinez</u>	TITLE	_____	DATE	<u>6/5/2024 10:25:21 AM</u>																													