

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

Form C-103
 Revised July 18, 2013

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

WELL API NO. 30-025-25513
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name New Mexico S State
8. Well Number 39
9. OGRID Number 330679
10. Pool name or Wildcat Blinebry

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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Empire Petroleum Corporation – New Mexico	
3. Address of Operator 2200 S. Utica Place Suite 150, Tulsa, Oklahoma 74114	
4. Well Location Unit Letter <u>D</u> : <u>330</u> feet from the <u>North</u> line and <u>550</u> feet from the <u>West</u> line Section <u>2</u> Township <u>22S</u> Range <u>37E</u> NMPM County <u>Lea</u>	
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 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: TEMPORARILY ABANDON <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- MIRU WOR.
- Unhung HH, PU on rod string and unseated pump. POOH with same.
- ND WH. NU BOP.
- Released TAC and scanned tubing OOH.
- RIH with CIBP and set at 5300'.
- Dumped 4 sks of Class C cmt on top.
- Pressure tested - held.
- Circulated packer fluid.
- Notified NMOCD of MIT.
- Performed MIT and submitted to NMOCD - passed.
- RDMO WOR on 8/9/2024.
- TA well.

FINAL TA STATUS- EXTENSION
 Approval of TA EXPIRES: 8/9/29
 Well needs to be **PLUGGED OR RETURNED**
 to **PRODUCTION**
 BY THE DATE STATED ABOVE: KF

Spud Date:

Rig Release Date:

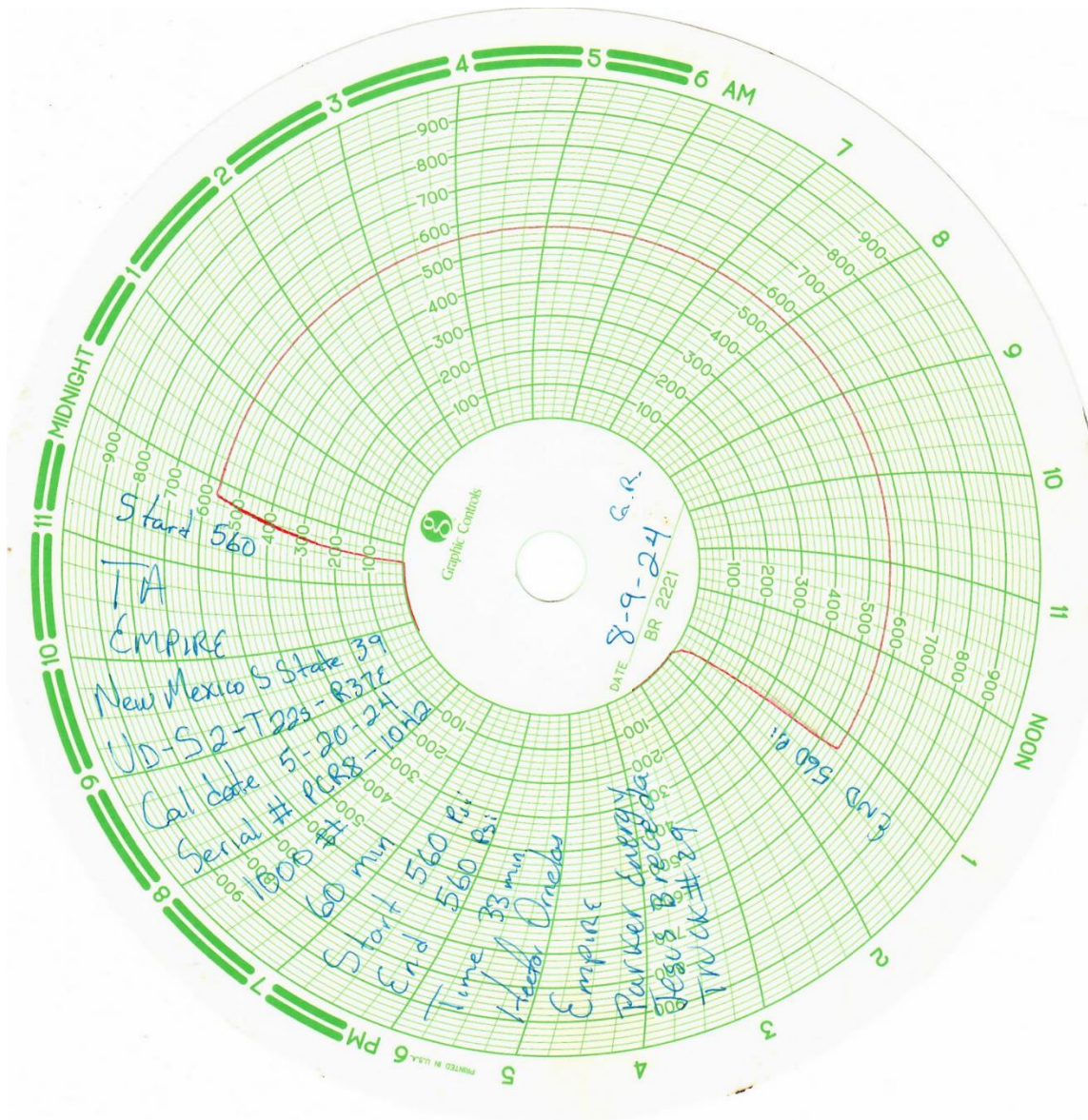
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Nathan Sandel TITLE Production Engineer DATE 08/12/2024

Type or print name Nathan Sandel E-mail address: nsandel@empirepetrocorp.com PHONE: 918-404-4202

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 8/22/24
 Conditions of Appr.



Block 1
1835 N. Fourth St., Hobbs, NM 88240
Phone: (575) 393-6101 Fax: (575) 393-6720

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name EMPIRE PETROLEUM CORPORATION	* API Number 30-025-25513
Property Name New Mexico S State	Well No. 39

* Surface Location									
UL - Lot D	Section 2	Township 22S	Range 37E	Part from	N/S Line	East from	E/W Line	County Lea	

Well Status									
YES <input checked="" type="checkbox"/> T&D WELL	NO	YES <input checked="" type="checkbox"/> SHUT-IN	NO	INJ	INJECTOR	SWD	OIL <input checked="" type="checkbox"/> PRODUCER	GAS	DATE 8-9-24

OBSERVED DATA

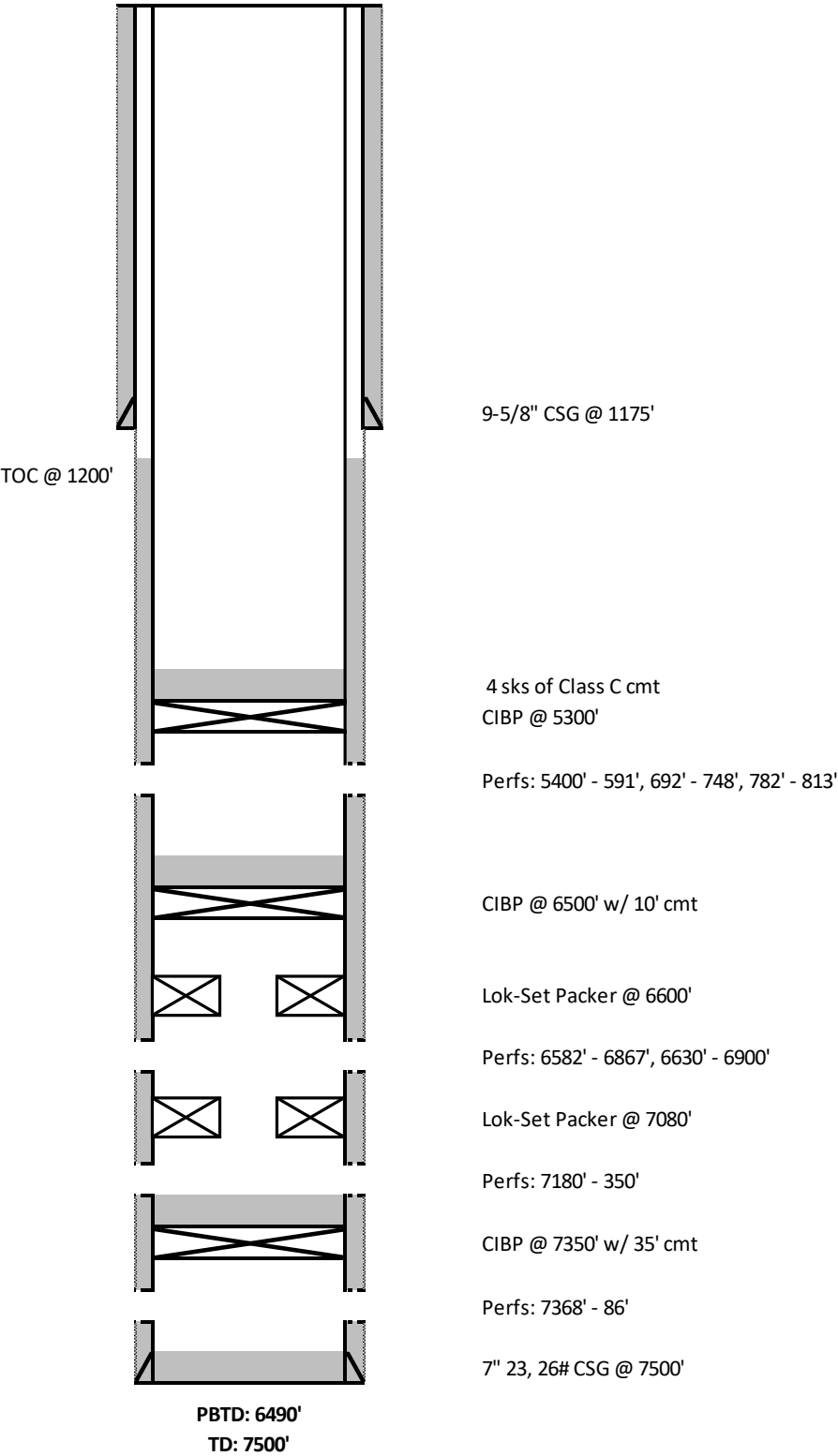
	(A) Surface	(B) Subsurface	(C) Chlorine	(D) Prod. Gas	(E) Other
Pressure	0			0	none
Flow Characteristics					
Puff	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	CO2
Steady Flow	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	WTR
Surges	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	GAS
Down to nothing	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Type of fluid
Gas or Oil	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Indicators
Water	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Y/N <input checked="" type="checkbox"/>	Whether used if
					applicable

Reports - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

TA
MIT/BHT

Signature: Hector Ornelas	OIL CONSERVATION DIVISION
Printed name: Hector Ornelas	Entered into RBDMS
Title: Consultant	Re-test
E-mail Address: hector.75.ornelas@gmail.com	
Date: 8-9-24	
Phone: 575 942 4004	
Witness: G.R.	

Current WBD



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Santa Fe, NM 87505

CONDITIONS

Action 372517

CONDITIONS

Operator: Empire New Mexico LLC 2200 S. Utica Place Tulsa, OK 74114	OGRID: 330679
	Action Number: 372517
	Action Type: [C-103] Sub. Temporary Abandonment (C-103U)

CONDITIONS

Created By	Condition	Condition Date
kfortner	TA expires 8/9/29	8/22/2024