

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. 30-025-04515
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 Eunice Monument South Unit
8. Well Number 187
9. OGRID Number 330679
10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres

<p>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.)</p>	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other: Injection	
2. Name of Operator Empire Petroleum Corporation	
3. Address of Operator 2200 S. Utica Place, Suite 150, Tulsa, Oklahoma 74114	
4. Well Location Unit Letter <u>D</u> : <u>654</u> feet from the <u>North</u> line and <u>660</u> feet from the <u>West</u> line Section <u>5</u> Township <u>21S</u> Range <u>36E</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 type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <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 a wellbore diagram of proposed completion or recompletion.

1. MIRU workover rig
2. Released packer and scanned tubing OOH – found HIT.
3. Bailed to PBTD.
4. Pressure tested casing – held.
5. RIH with redressed packer and tubing and set @ 3572'.
6. Circulated packer fluid down the backside.
7. Notified NMOCD of MIT.
8. Performed MIT and submitted results to NMOCD - passed.
9. RDMO on 9/16/2024.
10. RTI.

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 09/17/2024

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 9/17/24

Conditions of Approval (if any):



District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

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

BRADENHEAD TEST REPORT

Operator Name <i>EMPIRE</i>		API Number <i>30-025-04515</i>	
Property Name <i>EMSV 187</i>		Well No. <i>187</i>	

Surface Location

UL - Lot <i>D</i>	Section <i>5</i>	Township <i>25</i>	Range <i>36E</i>	Feet from	N/S Line	Feet From	E/W Line	County <i>Lca</i>
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Well Status

TA'D WELL YES	<input checked="" type="radio"/> NO <input checked="" type="radio"/> YES	SHUT-IN NO	<input checked="" type="radio"/> INJ <input type="radio"/> SWD	PRODUCER OIL	GAS	DATE <i>9-16-24</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	<i>0</i>
Flow Characteristics					
Puff	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	CO2 <input type="checkbox"/>
Steady Flow	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	WTR <input type="checkbox"/>
Surges	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	GAS <input type="checkbox"/>
Down to nothing	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	
Water	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	<i>Y / N</i>	

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

PWO
MIT/BHT

Signature: <i>Hector Ornelas</i>	OIL CONSERVATION DIVISION
Printed name: <i>Hector Ornelas</i>	Entered into RBDMS
Title: <i>Consultant</i>	Re-test
E-mail Address: <i>hector75ornelas@gmail.com</i>	
Date: <i>9-16-24</i>	
Phone: <i>575 942 4004</i>	
Witness: <i>GR</i>	

INSTRUCTIONS ON BACK OF THIS FORM

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Santa Fe, NM 87505

CONDITIONS

Action 384196

CONDITIONS

Operator: Empire New Mexico LLC 2200 S. Utica Place Tulsa, OK 74114	OGRID: 330679
	Action Number: 384196
	Action Type: [C-103] Sub. Workover (C-103R)

CONDITIONS

Created By	Condition	Condition Date
kfortner	None	9/17/2024