

| Santa Fe Main Office<br>Phone: (505) 476-3441<br><br>General Information<br>Phone: (505) 629-6116<br><br>Online Phone Directory<br><a href="https://www.emnrd.nm.gov/ocd/contact-us">https://www.emnrd.nm.gov/ocd/contact-us</a>   | <b>State of New Mexico</b><br><b>Energy, Minerals and Natural Resources</b><br><b>Oil Conservation Division</b><br><b>1220 S. St Francis Dr.</b><br><b>Santa Fe, NM 87505</b> | Form C-103<br>August 1, 2011<br><br>Permit 329810                 |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
|--|---|---|---|------------------------------|------------------------------|-------------------------------|--|---|--|---------------------------------------|--|--|--|---|---|---|--|-----------|--------------|------|---|------|--------|------|-----|---|-----|-----|------|---|---|------|---|---|----------|------|------------|------|--------|------|-----|-----|-----|-----|------|---|---|------|---|---|----------|------|----------|-------|-------|----|-----|---|------|-----|------|---|---|------|---|---|----------|------|----------|-------|-------|----|-----|------|------|-----|------|---|---|------|---|---|----------|------|----------|------|-----|----|------|---|-------|-----|------|---|---|------|---|---|----------|------|----------|------|-----|----|------|------|-------|-----|------|---|---|------|---|---|
|  |   | WELL API NUMBER<br>30-015-49911                                   |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
|  |   | 5. Indicate Type of Lease<br>State                                |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
|  |   | 6. State Oil & Gas Lease No.                                      |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)  |   | 7. Lease Name or Unit Agreement Name<br>SCANLON DRAW 34 STATE     |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 1. Type of Well:<br>Oil  |   | 8. Well Number<br>221H  |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 2. Name of Operator<br>V-F PETROLEUM INC   |   | 9. OGRID Number<br>24010  |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 3. Address of Operator<br>P.O. Box 1889, Midland, TX 79702   |   | 10. Pool name or Wildcat  |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 4. Well Location<br>Unit Letter <u>P</u> : <u>330</u> feet from the <u>S</u> line and feet <u>250</u> from the <u>E</u> line<br>Section <u>34</u> Township <u>18S</u> Range <u>28E</u> NMPM County <u>Eddy</u>   |   |   |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 11. Elevation (Show whether DR, KB, BT, GR, etc.)<br>3509 GR   |   |   |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 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 _____<br>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____  |   |   |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data<br><table style="width:100%;"> <tr> <td colspan="2">           NOTICE OF INTENTION TO:         </td> <td colspan="2">           SUBSEQUENT REPORT OF:         </td> </tr> <tr> <td>           PERFORM REMEDIAL WORK <input type="checkbox"/> </td> <td>           PLUG AND ABANDON <input type="checkbox"/> </td> <td>           REMEDIAL WORK <input type="checkbox"/> </td> <td>           ALTER CASING <input type="checkbox"/> </td> </tr> <tr> <td>           TEMPORARILY ABANDON <input type="checkbox"/> </td> <td>           CHANGE OF PLANS <input type="checkbox"/> </td> <td>           COMMENCE DRILLING OPNS. <input type="checkbox"/> </td> <td>           PLUG AND ABANDON <input type="checkbox"/> </td> </tr> <tr> <td>           PULL OR ALTER CASING <input type="checkbox"/> </td> <td>           MULTIPLE COMPL <input type="checkbox"/> </td> <td>           CASING/CEMENT JOB <input type="checkbox"/> </td> <td></td> </tr> <tr> <td colspan="2">           Other: _____         </td> <td colspan="2">           Other: <u>Drilling/Cement</u> <input checked="" type="checkbox"/> </td> </tr> </table>  |   |   | NOTICE OF INTENTION TO:                   |                              | SUBSEQUENT REPORT OF:        |                               | PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTER CASING <input type="checkbox"/> | TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE OF PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | MULTIPLE COMPL <input type="checkbox"/> | CASING/CEMENT JOB <input type="checkbox"/> |           | Other: _____ |      | Other: <u>Drilling/Cement</u> <input checked="" type="checkbox"/> |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| NOTICE OF INTENTION TO:  |   | SUBSEQUENT REPORT OF:   |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| PERFORM REMEDIAL WORK <input type="checkbox"/>   | PLUG AND ABANDON <input type="checkbox"/>   | REMEDIAL WORK <input type="checkbox"/>                            | ALTER CASING <input type="checkbox"/>     |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE OF PLANS <input type="checkbox"/>  | COMMENCE DRILLING OPNS. <input type="checkbox"/>                  | PLUG AND ABANDON <input type="checkbox"/> |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| PULL OR ALTER CASING <input type="checkbox"/>  | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>                        |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| Other: _____   |   | Other: <u>Drilling/Cement</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:<br>Attach wellbore diagram of proposed completion or recompletion.<br>Spud: 10/25/2022 5pm CST Rig Release: 11/09/2022 6am CST <b>10/25/2022</b> Spudded well.  |   |   |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| <b>Casing and Cement Program</b> <table border="1" style="width:100%; border-collapse: collapse; font-size: small;"> <thead> <tr> <th>Date</th> <th>String</th> <th>Fluid Type</th> <th>Hole Size</th> <th>Csg Size</th> <th>Weight lb/ft</th> <th>Grade</th> <th>Est TOC</th> <th>Dpth Set</th> <th>Sacks</th> <th>Yield</th> <th>Class</th> <th>1" Dpth</th> <th>Pres Held</th> <th>Pres Drop</th> <th>Open Hole</th> </tr> </thead> <tbody> <tr> <td>10/26/22</td> <td>Surf</td> <td>FreshWater</td> <td>17.5</td> <td>13.375</td> <td>54.5</td> <td>J55</td> <td>0</td> <td>475</td> <td>185</td> <td>1.72</td> <td>C</td> <td>0</td> <td>1000</td> <td>0</td> <td>N</td> </tr> <tr> <td>10/26/22</td> <td>Surf</td> <td>FreshWater</td> <td>17.5</td> <td>13.375</td> <td>54.5</td> <td>J55</td> <td>300</td> <td>475</td> <td>225</td> <td>1.34</td> <td>C</td> <td>0</td> <td>1000</td> <td>0</td> <td>N</td> </tr> <tr> <td>10/29/22</td> <td>Int1</td> <td>CutBrine</td> <td>12.25</td> <td>9.625</td> <td>40</td> <td>J55</td> <td>0</td> <td>3520</td> <td>730</td> <td>1.91</td> <td>C</td> <td>0</td> <td>1400</td> <td>0</td> <td>N</td> </tr> <tr> <td>10/29/22</td> <td>Int1</td> <td>CutBrine</td> <td>12.25</td> <td>9.625</td> <td>40</td> <td>J55</td> <td>3000</td> <td>3520</td> <td>200</td> <td>1.33</td> <td>C</td> <td>0</td> <td>1400</td> <td>0</td> <td>N</td> </tr> <tr> <td>11/08/22</td> <td>Prod</td> <td>CutBrine</td> <td>8.75</td> <td>5.5</td> <td>20</td> <td>P110</td> <td>0</td> <td>12188</td> <td>289</td> <td>3.01</td> <td>H</td> <td>0</td> <td>2300</td> <td>0</td> <td>N</td> </tr> <tr> <td>11/08/22</td> <td>Prod</td> <td>CutBrine</td> <td>8.75</td> <td>5.5</td> <td>20</td> <td>P110</td> <td>7000</td> <td>12188</td> <td>281</td> <td>1.36</td> <td>H</td> <td>0</td> <td>2300</td> <td>0</td> <td>N</td> </tr> </tbody> </table> |   |   | Date                                      | String                       | Fluid Type                   | Hole Size                     | Csg Size                                       | Weight lb/ft                              | Grade                                  | Est TOC                               | Dpth Set                                     | Sacks                                    | Yield  | Class                                     | 1" Dpth                                       | Pres Held                               | Pres Drop                                  | Open Hole | 10/26/22     | Surf | FreshWater  | 17.5 | 13.375 | 54.5 | J55 | 0 | 475 | 185 | 1.72 | C | 0 | 1000 | 0 | N | 10/26/22 | Surf | FreshWater | 17.5 | 13.375 | 54.5 | J55 | 300 | 475 | 225 | 1.34 | C | 0 | 1000 | 0 | N | 10/29/22 | Int1 | CutBrine | 12.25 | 9.625 | 40 | J55 | 0 | 3520 | 730 | 1.91 | C | 0 | 1400 | 0 | N | 10/29/22 | Int1 | CutBrine | 12.25 | 9.625 | 40 | J55 | 3000 | 3520 | 200 | 1.33 | C | 0 | 1400 | 0 | N | 11/08/22 | Prod | CutBrine | 8.75 | 5.5 | 20 | P110 | 0 | 12188 | 289 | 3.01 | H | 0 | 2300 | 0 | N | 11/08/22 | Prod | CutBrine | 8.75 | 5.5 | 20 | P110 | 7000 | 12188 | 281 | 1.36 | H | 0 | 2300 | 0 | N |
| Date   | String  | Fluid Type  | Hole Size                                 | Csg Size                     | Weight lb/ft                 | Grade                         | Est TOC  | Dpth Set                                  | Sacks                                  | Yield                                 | Class  | 1" Dpth                                  | Pres Held  | Pres Drop                                 | Open Hole                                     |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 10/26/22   | Surf  | FreshWater  | 17.5                                      | 13.375                       | 54.5                         | J55                           | 0  | 475                                       | 185                                    | 1.72                                  | C  | 0  | 1000   | 0   | N   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 10/26/22   | Surf  | FreshWater  | 17.5                                      | 13.375                       | 54.5                         | J55                           | 300  | 475                                       | 225                                    | 1.34                                  | C  | 0  | 1000   | 0   | N   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 10/29/22   | Int1  | CutBrine  | 12.25                                     | 9.625                        | 40                           | J55                           | 0  | 3520                                      | 730                                    | 1.91                                  | C  | 0  | 1400   | 0   | N   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 10/29/22   | Int1  | CutBrine  | 12.25                                     | 9.625                        | 40                           | J55                           | 3000   | 3520                                      | 200                                    | 1.33                                  | C  | 0  | 1400   | 0   | N   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 11/08/22   | Prod  | CutBrine  | 8.75                                      | 5.5                          | 20                           | P110                          | 0  | 12188                                     | 289                                    | 3.01                                  | H  | 0  | 2300   | 0   | N   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 11/08/22   | Prod  | CutBrine  | 8.75                                      | 5.5                          | 20                           | P110                          | 7000   | 12188                                     | 281                                    | 1.36                                  | H  | 0  | 2300   | 0   | N   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| 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 NMOCD guidelines <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/> .  |   |   |   |                              |                              |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| <table style="width:100%;"> <tr> <td>SIGNATURE</td> <td><u>Electronically Signed</u></td> <td>TITLE</td> <td><u>Regulatory Manager</u></td> <td>DATE</td> <td><u>11/30/2022</u></td> </tr> <tr> <td>Type or print name</td> <td><u>Pam O'Neil</u></td> <td>E-mail address</td> <td><u>pamo@vfpetroleum.com</u></td> <td>Telephone No.</td> <td><u>432-683-3344</u></td> </tr> </table>   |   |   | SIGNATURE                                 | <u>Electronically Signed</u> | TITLE                        | <u>Regulatory Manager</u>     | DATE   | <u>11/30/2022</u>                         | Type or print name                     | <u>Pam O'Neil</u>                     | E-mail address                               | <u>pamo@vfpetroleum.com</u>              | Telephone No.                                    | <u>432-683-3344</u>                       |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| SIGNATURE  | <u>Electronically Signed</u>  | TITLE   | <u>Regulatory Manager</u>                 | DATE                         | <u>11/30/2022</u>            |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| Type or print name   | <u>Pam O'Neil</u>   | E-mail address  | <u>pamo@vfpetroleum.com</u>               | Telephone No.                | <u>432-683-3344</u>          |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| <b>For State Use Only:</b> <table style="width:100%;"> <tr> <td>APPROVED BY:</td> <td><u>Keith Dziokonski</u></td> <td>TITLE</td> <td><u>Petroleum Specialist A</u></td> <td>DATE</td> <td><u>12/19/2024 8:17:19 AM</u></td> </tr> </table>  |   |   | APPROVED BY:                              | <u>Keith Dziokonski</u>      | TITLE                        | <u>Petroleum Specialist A</u> | DATE   | <u>12/19/2024 8:17:19 AM</u>              |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |
| APPROVED BY:   | <u>Keith Dziokonski</u>   | TITLE   | <u>Petroleum Specialist A</u>             | DATE                         | <u>12/19/2024 8:17:19 AM</u> |                               |  |   |  |                                       |  |  |  |   |   |   |  |           |              |      |   |      |        |      |     |   |     |     |      |   |   |      |   |   |          |      |            |      |        |      |     |     |     |     |      |   |   |      |   |   |          |      |          |       |       |    |     |   |      |     |      |   |   |      |   |   |          |      |          |       |       |    |     |      |      |     |      |   |   |      |   |   |          |      |          |      |     |    |      |   |       |     |      |   |   |      |   |   |          |      |          |      |     |    |      |      |       |     |      |   |   |      |   |   |