

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. 30-045-29748
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Hilcorp Energy Company		6. State Oil & Gas Lease No. STATE E-3671-3
3. Address of Operator 382 Road 3100, Aztec, NM 87410		7. Lease Name or Unit Agreement Name STATE COM O
4. Well Location Unit Letter <u>I</u> : <u>1825</u> feet from the <u>South</u> line and <u>790</u> feet from the <u>East</u> line Section <u>16</u> Township <u>029N</u> Range <u>008W</u> NMPM County <u>SAN JUAN</u>		8. Well Number <u>12</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6396' GL		9. OGRID Number 372171
		10. Pool name or Wildcat Basin Fruitland Coal/Blanco Mesaverde/Basin Dakota

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"/> RECOMPLETE		OTHER: CORRECTION <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.

Record Cleanup: The Fruitland Coal C-104 RC filed on 8/6/2024 inadvertently omitted the Communitization Agreement number. The production has not reported to Communitization Agreement dated 11/15/1990 since its completion on 7/19/2024. Please see amended C-104 RC.

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 Cherylene Weston TITLE Operations/Regulatory Tech-Sr. DATE 1/31/2025

Type or print name Cherylene Weston E-mail address: cweston@hilcorp.com PHONE: 713-289-2615

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

Santa Fe Main Office Phone: (505) 476-3441 Fax: (55) 476-3462 General Information Phone: (505) 629-6116 Online Phone Directory Visit: https://www.emnrd.nm.gov/ocd/contact-us/	State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION	C-104 Revised July 9, 2024 Submit Electronically Via OCD Permitting
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REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Section 1 - Operator and Well Information

Submittal Type: <input type="checkbox"/> Test Allowable (C-104RT) <input type="checkbox"/> New Well (C-104NW) <input checked="" type="checkbox"/> Recomplete (C-104RC) <input type="checkbox"/> Pay Add (C-104RC) <input checked="" type="checkbox"/> Amended	
Operator Name: Hilcorp Energy Company	OGRID: 372171
Property Name and Well Number: STATE COM O 12	Property Code: 319097
Mineral Owner: <input checked="" type="checkbox"/> State <input type="checkbox"/> Fee <input type="checkbox"/> Tribal <input type="checkbox"/> Federal	API Number: 30-045-29748
Pool Name: BASIN FRUITLAND COAL	Pool Code: 71629

Section 2 – Surface Location

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
I	16	029N	08W		1825' SOUTH	790' EAST	36.723466	-107.67398	SAN JUAN

Section 3 – Completion Information

Producing Method F	Ready Date 7/19/2024	Perforations MD 5,032' – 5,646'	Perforations TVD 5,032' – 5,646'
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Section 4 – Action IDs for Submissions and Order Numbers

List Action IDs for Drilling Sundries	Was an Order required / needed (Y/N), if yes list Order number:
C-104 RT Action ID (if C-104NW): N/A	Communitization Agreement <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, Order No. 200677
Surface Casing Action ID: Previous to system	Unit: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, Order No.
Intermediate 1 Casing Action ID: Previous to system	Compulsory Pooling: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, Order No.
Intermediate 2 Casing Action ID: Previous to system	Down Hole Commingling: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, Order No. DHC-5441
Production Casing Action ID: Previous to system	Surface Commingling: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, Order No.
All casing was pressure tested in accordance with NMAC <input type="checkbox"/> Yes <input type="checkbox"/> No	Non-standard Location: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Common ownership Order No.
Liner 1 Action ID: Previous to system	Non-standard Proration: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, Order No.
Casing was installed prior to OCD's Action ID system (Y/N): Y	Simultaneous Dedication: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, Order No.

Section 5 - Operator Signature and Certification

<input checked="" type="checkbox"/> I hereby certify that the required Water Use Report has been, or will be, submitted for this well's completion.	
<input checked="" type="checkbox"/> I hereby certify that the required Fracfocus disclosure has been, or will be, submitted for this well's completion.	
<input checked="" type="checkbox"/> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
Name Cherylene Weston	
Title: Cherylene Weston, Operations Regulatory Tech Sr.	Date 1/31/2025

Sante Fe Main Office
Phone: (505) 476-3441

General Information
Phone: (505) 629-6116

Online Phone Directory
<https://www.emnrd.nm.gov/ocd/contact-us>

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 427161

CONDITIONS

Operator: HILCORP ENERGY COMPANY 1111 Travis Street Houston, TX 77002	OGRID: 372171
	Action Number: 427161
	Action Type: [C-103] NOI General Sundry (C-103X)

CONDITIONS

Created By	Condition	Condition Date
dmcclure	ACCEPTED FOR RECORD ONLY	2/21/2025