

Santa Fe Main Office  
Phone: (505) 476-3441  
General Information  
Phone: (505) 629-6116

State of New Mexico  
Energy, Minerals and Natural Resources

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

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.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		WELL API NO. 30-015-55679
2. Name of Operator Permian Resources Operating, LLC		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 300 N. Marienfeld St Suite 1000, Midland TX 79701		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>L</u> : <u>2,437</u> feet from the <u>South</u> line and <u>480</u> feet from the <u>West</u> line Section <u>8</u> Township <u>22S</u> Range <u>27E</u> NMPM County <u>Eddy</u>		7. Lease Name or Unit Agreement Name Caveman
		8. Well Number 424H
		9. OGRID Number 372165
		10. Pool name or Wildcat Purple Sage; Wolfcamp
		11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3103'

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: Tubing Exception <input checked="" 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 wellbore diagram of proposed completion or recompletion.

Permian Resources Operating, LLC is respectfully requesting a 90-day tubing exception, to allow initial production of the well prior to tubing installation.

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 Jessica Dooling TITLE Regulatory Specialist DATE 2/21/2025

Type or print name Jessica Dooling E-mail address: jessica.dooling@permianres.com PHONE: 432-999-3072

**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

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CONDITIONS

Action 434341

**CONDITIONS**

Operator: Permian Resources Operating, LLC 300 N. Marienfeld St Ste 1000 Midland, TX 79701	OGRID: 372165
	Action Number: 434341
	Action Type: [C-103] Sub. Drilling (C-103N)

**CONDITIONS**

Created By	Condition	Condition Date
dmcclure	going forward, submit as a C-103A	11/21/2025