

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

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

State of New Mexico
Energy, Minerals and Natural Resources

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

WELL API NO. 30-025-42722	
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 EAST VACUUM (GSA) UNIT	
8. Well Number 517	
9. OGRID Number 331199	
10. Pool name or Wildcat	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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 Gas Well Other **Injection**

2. Name of Operator
Maverick Permian LLC

3. Address of Operator
1000 Main st STE 2900 Houston, Tx, 77002

4. Well Location
Unit Letter **L** : **1815** feet from the **South** line and **405** feet from the **West** line
Section **33** Township **17S** Range **35E** NMPM County

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON
TEMPORARILY ABANDON CHANGE PLANS
PULL OR ALTER CASING MULTIPLE COMPL
DOWNHOLE COMMINGLE
CLOSED-LOOP SYSTEM
OTHER:

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING
COMMENCE DRILLING OPNS. P AND A
CASING/CEMENT JOB
OTHER:

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.

Maverick Permian LLC is submitting for your review the workover plan for this well. We have no intention of changing anything schematically downhole.

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 Arbaz HussainTITLE Regulatory AnalystDATE 01/07/2026Type or print name Arbaz Hussain
For State Use OnlyE-mail address: ahussain@dgoc.comPHONE: 832-589-5181

APPROVED BY: _____

TITLE _____

DATE _____

Conditions of Approval (if any):



DIVERSIFIED
energy

EVGSAU 3374-517W (API 30-025-42722)

MIT REMEDIATION – RTI

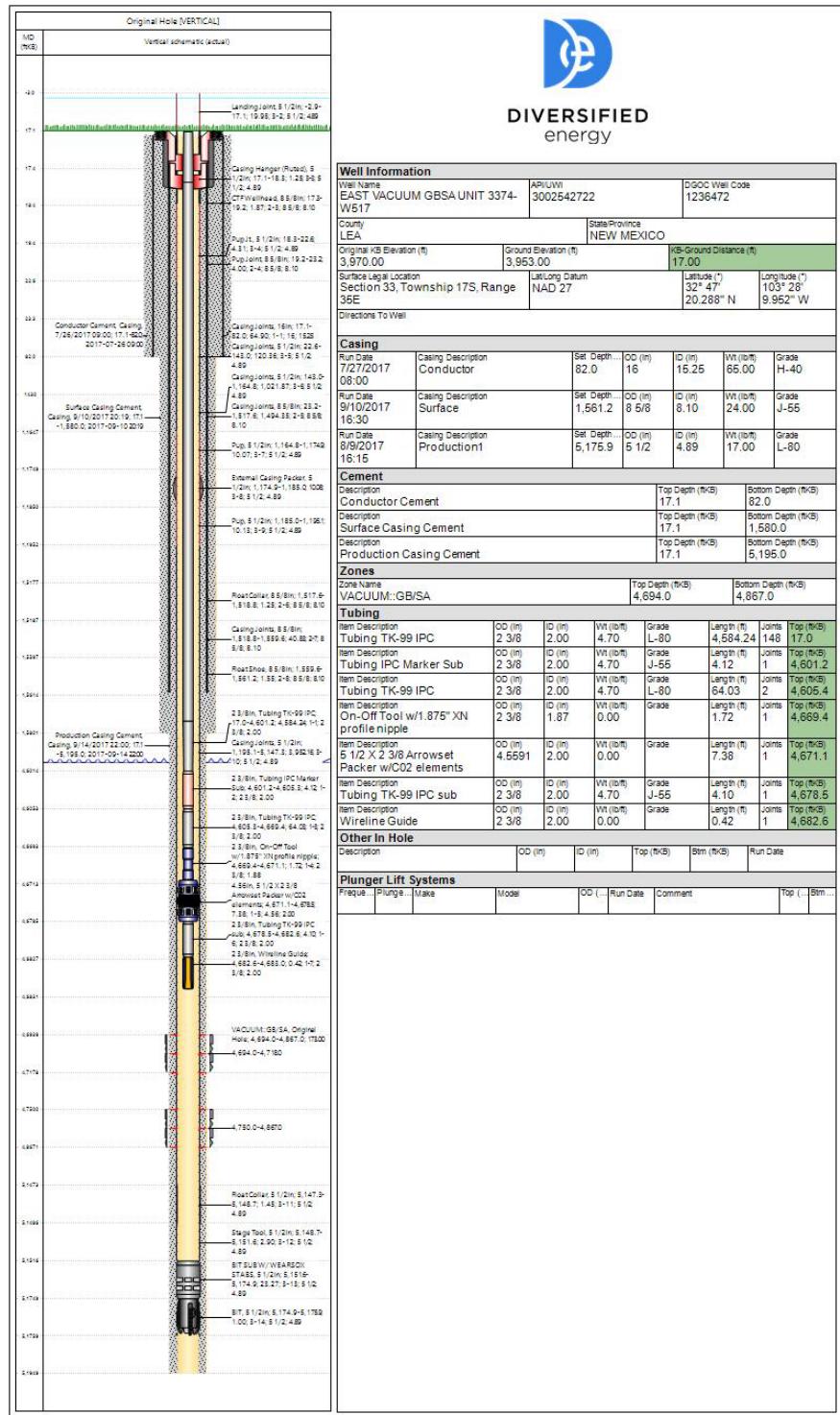
OBJECTIVE: Well Failed MIT. Will perform necessary investigative steps to determine cause of leak, and will remediate as necessary based on findings. Based on observations during MIT, it is most likely a HIT or leaking packer. Ultimate goal is to repair leak to pass MIT, and return well to injection.

1. MIRU WOR & equipment. Test anchors if not tested within the last two years.
2. Confirm MIT by testing backside to 500 psi.
 1. If successful, contact state for retest and RDMO.
 2. If unsuccessful move to step 3.
3. Kill well if necessary, with 10# brine.
4. ND WH. NU BOP's.
5. Release packer and lower 1 joint. Reset packer and retest backside.
 1. If successful, contact state for retest and RDMO.
 2. If unsuccessful, move to step 6.
6. Release packer, POOH Scanning tubing.
7. RIH with RBP and test packer.
8. Set plug 50' above top perf and pressure test production casing against plug.
 1. If test passes, retrieve RBP and POOH. Reinstall repaired injection string, adhering to the same design as previous. Hydrotest tubing in hole.
 2. If pressure test fails, move to step 9.
9. Come up hole with test packer, setting and testing at different points to determine top and bottom depths of leaking interval.
 1. Call to discuss remediation plan with Engineer based on findings. Report leak depth interval(s) and PIR/Pressure(s).
10. Following casing leak remediation, reinstall repaired injection string, hydrotesting tubing in hole.
 1. Adhere to same injection string design as previous.
11. Circulate packer fluid.
12. Contact state for new test, chart pressure.
13. RDMO WOR & equipment. Notify Foreman/LO to RTI well once approval is received from State.



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Current WBD below: Expand Image if needed, or refer to WellView for full WBD Detail



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CONDITIONS

Action 541130

CONDITIONS

Operator: Maverick Permian LLC 1000 Main Street, Suite 2900 Houston, TX 77002	OGRID: 331199
	Action Number: 541130
	Action Type: [C-103] NOI Workover (C-103G)

CONDITIONS

Created By	Condition	Condition Date
anthony.harris	Post workover MIT required with OCD witness	1/16/2026
anthony.harris	No tubing upsize permitted	1/16/2026
anthony.harris	Submit post workover C-103 Subsequent report with a summary of work performed and attach an updated wellbore diagram	1/16/2026