

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 and Natural Resources

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

| | |
|--|--|
| WELL API NO. 30-025-26387 | |
| 5. Indicate Type of Lease STATE <input 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 #001 | |
| 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

2. Name of Operator Maverick Permian

3. Address of Operator LLC
1000 Main Street Ste 2900 Houston, TX 77002

4. Well Location
Unit Letter K : 2630 feet from the South line and 2630 feet from the South line
Section 29 17S Township 32E Range NMPM 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:

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.

Tested MIT on 5/29/2025, passing test, witnessed by NMOCD Rep

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 Nicole Lee

TITLE Regulatory Lead

DATE 6/26/25

Type or print name Nicole Lee
For State Use Only

E-mail address: nlee@dgoc.com

PHONE: 713-437-8097

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):

DEQ0002
South District-Artesia

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

BRADENHEAD TEST REPORT

| | | |
|-----------------------------|--|--------------|
| Operator Name | | API Number |
| Maurerch Permian | | 30-025-24387 |
| Property Name | | Well No. |
| East Vacuum (GSA) Unit 2941 | | 24387-1 |

Surface Location

| UL-Lot | Section | Township | Range | Feet from | N/S Line | Feet From | E/W Line | County |
|--------|---------|----------|-------|-----------|----------|-----------|----------|--------|
| K | 29 | 175 | 35E | 2630 | S | 1330 | W | Lea |

Well Status

| YES | TA'D WELL | NO | YES | SHUT-IN | NO | INJ | INJECTOR | SWD | OIL | PRODUCER | GAS | DATE |
|-----|-----------|----|-----|---------|-----|-----|----------|-----|-----|----------|-----|-----------|
| YES | NO | NO | NO | NO | INJ | INJ | INJECTOR | SWD | OIL | PRODUCER | GAS | 5/29/2025 |

OBSERVED DATA

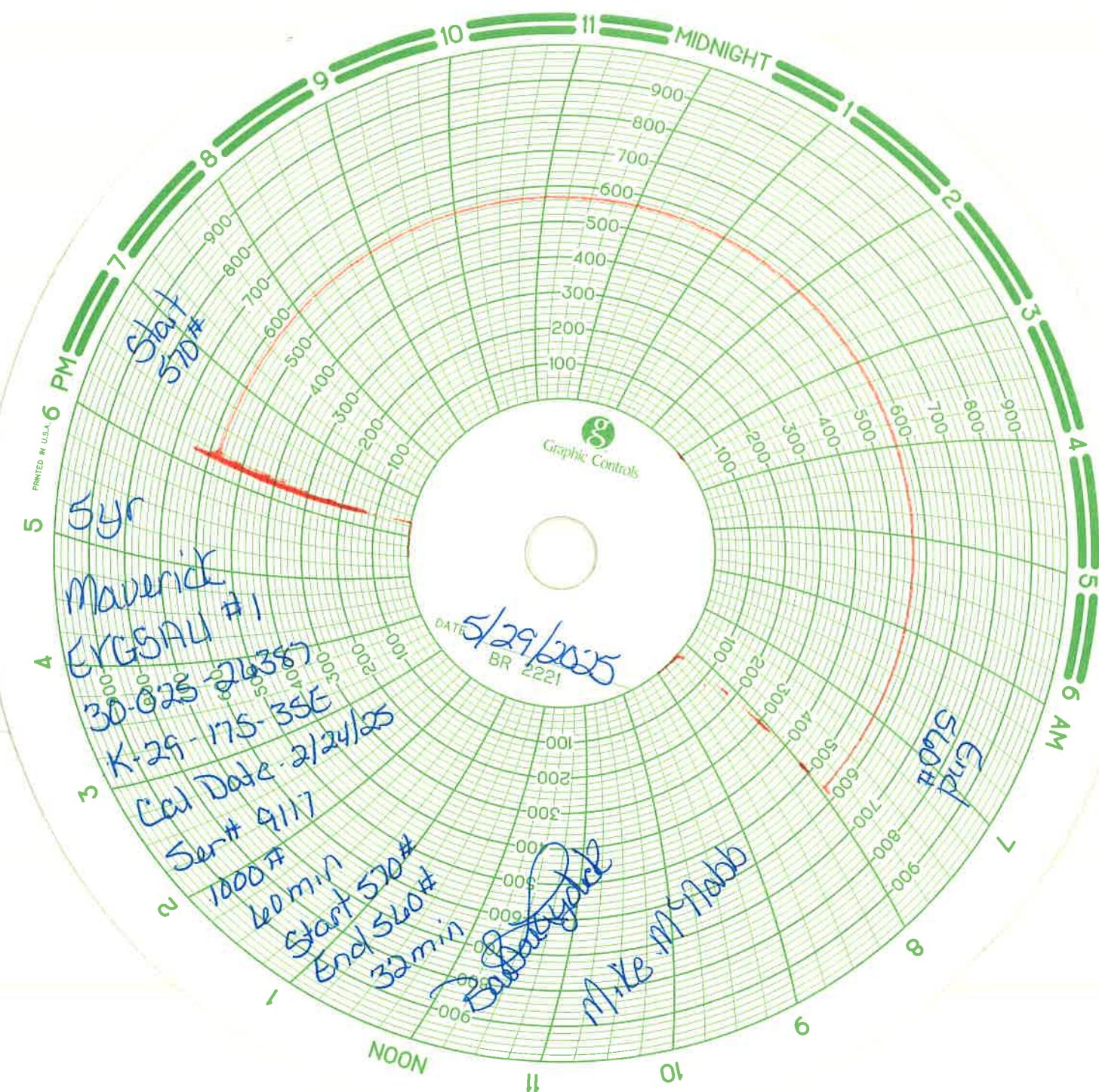
| | (A)Surface | (B)Interim(1) | (C)Interim(2) | (D)Prod Csgn | (E)Tubing |
|----------------------|------------|---------------|---------------|--------------|---|
| Pressure | O | | | O | 840 |
| Flow Characteristics | | | | | |
| Puff | Y / N | Y / N | Y / N | Y / N | CO2 |
| Steady Flow | Y / N | Y / N | Y / N | Y / N | WTR |
| Surges | Y / N | Y / N | Y / N | Y / N | GAS |
| Down to nothing | Y / N | Y / N | Y / N | Y / N | Type of fluid Injected for Waterflood & Apples |
| Gas or Oil | Y / N | Y / N | Y / N | Y / N | |
| Water | Y / N | Y / N | Y / N | Y / N | |

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

BHT-OK

| | | |
|-----------------|---------------------------|--|
| Signature: | OIL CONSERVATION DIVISION | |
| Printed name: | Entered into RBDMS | |
| Title: | Re-test | |
| E-mail Address: | | |
| Date: | Phone: | |
| | Witness: | |

INSTRUCTIONS ON BACK OF THIS FORM



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CONDITIONS

Action 480929

CONDITIONS

| | |
|--|--|
| Operator: Maverick Permian LLC 1000 Main Street, Suite 2900 Houston, TX 77002 | OGRID: 331199 |
| | Action Number: 480929 |
| | Action Type: [C-103] Sub. General Sundry (C-103Z) |
| | |

CONDITIONS

| Created By | Condition | Condition Date |
|------------|-----------|----------------|
| gcordero | None | 1/23/2026 |