

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 ResourcesForm C-103  
Revised July 18, 2013OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. <b>30-025-26387</b>
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 <b>EAST VACUUM (GSA) UNIT</b>
8. Well Number <b>#001</b>
9. OGRID Number <b>331199</b>
10. Pool name or Wildcat

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 type="checkbox"/> Other	
2. Name of Operator <b>Maverick Permian</b>	
3. Address of Operator <b>LLC</b> 1000 Main Street Ste 2900 Houston, TX 77002	
4. Well Location Unit Letter <b>K</b> : <b>2630</b> feet from the <b>South</b> line and <b>2630</b> feet from the <b>South</b> line Section <b>29</b> <b>17S</b> Township <b>32E</b> Range <b>NMPM</b> 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 E-mail address: nlee@dgoc.com PHONE: 713-437-8097  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 Conditions of Approval (if any): \_\_\_\_\_

DEW&X  
South District-Artesia

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

## BRADENHEAD TEST REPORT

Operator Name <i>Mawence Rerman</i>		API Number <i>30-025-26387</i>	
Property Name <i>East Vacuum (GSA) Unit 2941</i>		Well No. <i>331</i>	

## 1. Surface Location

UL - Lot <i>K</i>	Section <i>29</i>	Township <i>17S</i>	Range <i>35E</i>	Feet from <i>2630</i>	N/S Line <i>S</i>	Feet From <i>1330</i>	E/W Line <i>W</i>	County <i>Lea</i>
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## Well Status

YES	TA'D WELL <i>(NO)</i>	YES	SHUT-IN <i>(NO)</i>	<i>(INJ)</i>	INJECTOR	SWD	OIL	PRODUCER	GAS	DATE <i>5/29/2025</i>
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## OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	<i>0</i>			<i>0</i>	<i>840</i>
Flow Characteristics					
Puff	Y / <i>(N)</i>	Y / N	Y / N	<i>(Y)</i> / N	CO2 <i>✓</i>
Steady Flow	Y / <i>(N)</i>	Y / N	Y / N	Y / <i>(N)</i>	WTR <i>✓</i>
Surges	Y / <i>(N)</i>	Y / N	Y / N	Y / <i>(N)</i>	GAS <i>✓</i>
Down to nothing	<i>(Y)</i> / N	Y / N	Y / N	<i>(Y)</i> / N	Type of Fluid
Gas or Oil	Y / <i>(N)</i>	Y / N	Y / N	Y / <i>(N)</i>	Injected for
Water	Y / <i>(N)</i>	Y / N	Y / N	Y / <i>(N)</i>	Waterflood if
					applicable

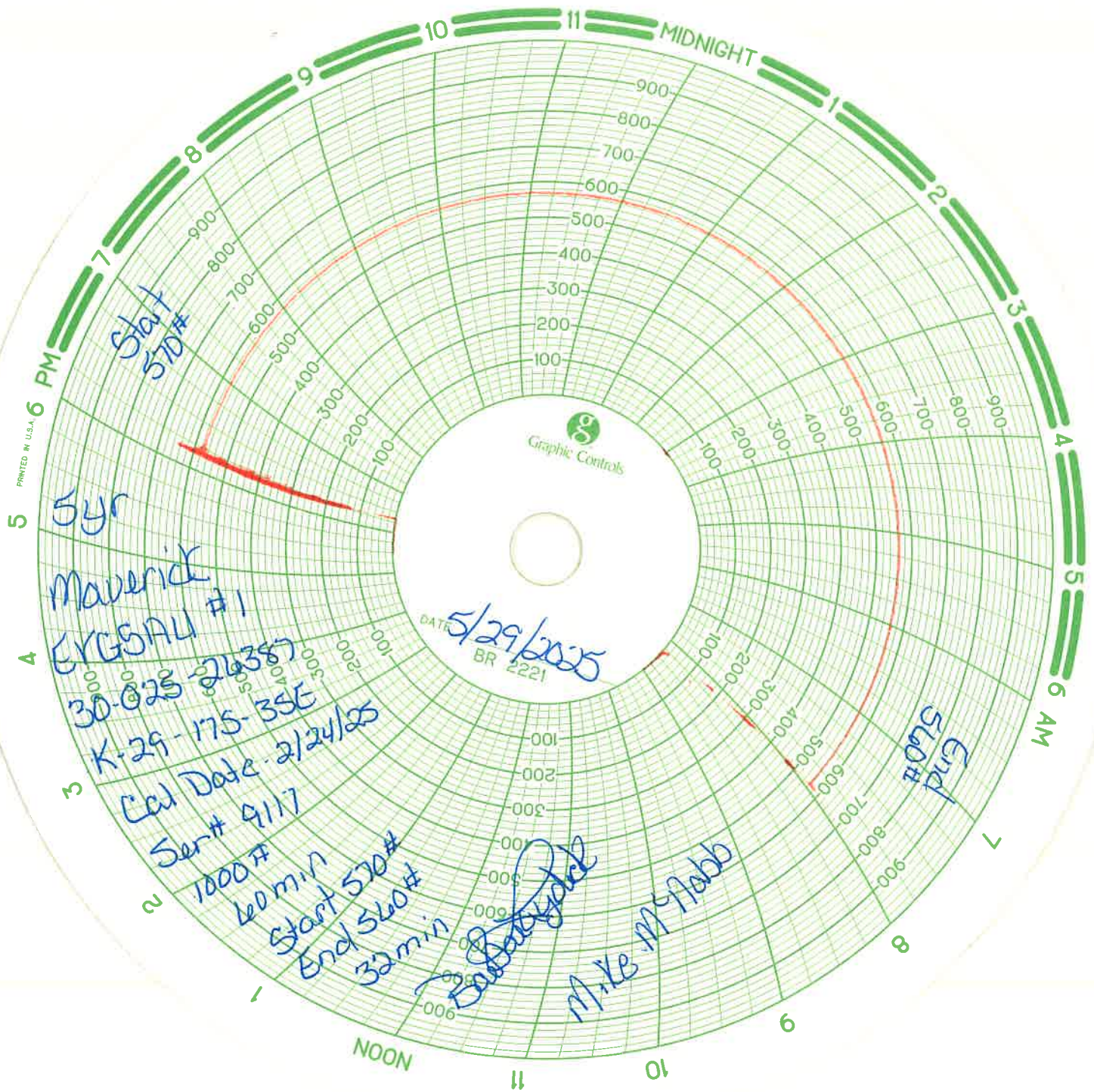
Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

*BHT-OK*

Signature:		OIL CONSERVATION DIVISION
Printed name:		Entered into RBDMS
Title:		Re-test
E-mail Address:		
Date:	Phone:	
Witness:	<i>Barbara [Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM





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1220 S. St Francis Dr.  
Santa Fe, NM 87505

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