

Santa Fe Main Office Phone: (505) 476-3441  General Information Phone: (505) 629-6116  Online Phone Directory <a href="https://www.emnrd.nm.gov/ocd/contact-us">https://www.emnrd.nm.gov/ocd/contact-us</a>	<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b> <b>Oil Conservation Division</b> <b>1220 S. St Francis Dr.</b> <b>Santa Fe, NM 87505</b>	Form C-103 August 1, 2011  Permit 408143																				
		WELL API NUMBER 30-015-57660																				
		5. Indicate Type of Lease State																				
		6. State Oil & Gas Lease No.																				
<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.)		7. Lease Name or Unit Agreement Name LAJITAS 5 4 STATE COM																				
1. Type of Well: Oil		8. Well Number 122H																				
2. Name of Operator Permian Resources Operating, LLC		9. OGRID Number 372165																				
3. Address of Operator 300 N. Marienfeld St Ste 1000, Midland, TX 79701		10. Pool name or Wildcat																				
4. Well Location Unit Letter <u>E</u> : <u>1564</u> feet from the <u>N</u> line and feet <u>792</u> from the <u>W</u> line Section <u>5</u> Township <u>19S</u> Range <u>28E</u> NMPM County <u>Eddy</u>																						
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3520 GR																						
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____																						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <table style="width: 100%;"> <tr> <td colspan="2" style="text-align: center;">NOTICE OF INTENTION TO:</td> <td colspan="2" style="text-align: center;">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>PERFORM REMEDIAL WORK</td> <td><input type="checkbox"/></td> <td>PLUG AND ABANDON</td> <td><input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON</td> <td><input type="checkbox"/></td> <td>CHANGE OF PLANS</td> <td><input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING</td> <td><input type="checkbox"/></td> <td>MULTIPLE COMPL</td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="2">Other: _____</td> <td colspan="2">Other: <b>Spud</b> <input checked="" type="checkbox"/></td> </tr> </table>			NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:		PERFORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>	TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE OF PLANS	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>	MULTIPLE COMPL	<input type="checkbox"/>	Other: _____		Other: <b>Spud</b> <input checked="" type="checkbox"/>	
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:																				
PERFORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>																			
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE OF PLANS	<input type="checkbox"/>																			
PULL OR ALTER CASING	<input type="checkbox"/>	MULTIPLE COMPL	<input type="checkbox"/>																			
Other: _____		Other: <b>Spud</b> <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  <b>1/29/2026</b> Spudded well.  1/29/2026 Spud 17-1/2" hole at 18:30 HRS																						
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines <input type="checkbox"/> , a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/> .																						
SIGNATURE <u>Electronically Signed</u> TITLE <u>Regulatory Manager</u> DATE <u>2/1/2026</u>		Type or print name <u>Stephanie Rabadue</u> E-mail address <u>stephanie.rabadue@permianres.com</u> Telephone No. <u>432-260-4388</u>																				
<b>For State Use Only:</b>  APPROVED BY: <u>Keith Dziokonski</u> TITLE <u>Petroleum Specialist A</u> DATE <u>2/2/2026</u>																						