

Submit 1 Copy To Appropriate District Office  
District I – (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II – (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III – (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV – (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

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

|                                                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------|
| WELL API NO.<br>30-025-46685                                                                                                                |
| 5. Indicate Type of Lease <b>FEDERAL</b> <input checked="" type="checkbox"/><br>STATE <input type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                                                                                |
| 7. Lease Name or Unit Agreement Name<br>Cyclone Federal SWD                                                                                 |
| 8. Well Number 1                                                                                                                            |
| 9. OGRID Number 328259                                                                                                                      |
| 10. Pool name or Wildcat<br>SWD; DEVONIAN-SILURIAN                                                                                          |

|                                                                                                                                                                                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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 <input checked="" type="checkbox"/> SWD                                                                                    |  |
| 2. Name of Operator<br>Permian Oilfield Partners LLC                                                                                                                                                                  |  |
| 3. Address of Operator<br>PO Box 3329, Hobbs, NM 88241                                                                                                                                                                |  |
| 4. Well Location<br>Unit Letter <b>H</b> : <b>1494</b> feet from the <b>North</b> line and <b>291</b> feet from the <b>East</b> line<br>Section <b>11</b> Township <b>25S</b> Range <b>32E</b> NMPM County <b>Lea</b> |  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3544' RKB                                                                                                                                                       |  |

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

| NOTICE OF INTENTION TO:                        |                                           | SUBSEQUENT REPORT OF:                            |                                          |
|------------------------------------------------|-------------------------------------------|--------------------------------------------------|------------------------------------------|
| 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: <input type="checkbox"/>                |                                           | OTHER: <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

NMOCD Order #R-20883 requires that a BH pressure measurement representative of the open hole completion be measured prior to commencing injection. The top of the Devonian formation was encountered @ 17366', and 7 5/8" casing shoe is @ 17380' (wireline log depths).

Permian Oilfield Partners LLC ran electronic pressure gauges in subject well on 3/7/2020 and obtained the following data: Depth 18585', pressure 8493.9 psia, gradient .457 psi/ft, maximum temperature 259.6 deg F.

Spud Date:

1/21/2020

Rig Release Date:

3/11/2020

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Gary E. Fisher TITLE President DATE 3/13/2020

Type or print name Gary E Fisher E-mail address: gfisher@popmidstream.com PHONE: 817-606-7630

**For State Use Only**

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

Conditions of Approval (if any):