

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

OCD – REC'D 7/30/2020

Form C-103
Revised July 18, 2013

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

WELL API NO.

30-015-27398

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

LH2460

7. Lease Name or Unit Agreement Name

POGO 36 STATE

8. Well Number

#1

9. OGRID Number

21355

10. Pool name or Wildcat

NBD - DELAWARE

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

SOUTHWEST ROYALTIES, INC.

3. Address of Operator

P.O. BOX 53570; MIDLAND, TEXAS 79710-3570

4. Well Location

Unit Letter **L** : **2310'** feet from the **SOUTH** line and **330'** feet from the **WEST** line

Section **36** Township **25-S** Range **29-E** NMPM **EDDY** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3037.5' GR

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.

SUCCESSFUL BRADENHEAD TEST PERFORMED ON WELL AS REQUESTED BY NMOCD. BRADENHEAD TEST ATTACHED FOR RECORD.

Spud Date:

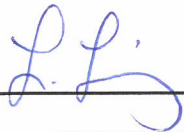
APRIL 30, 1993

Rig Release Date:

MAY 19, 1993

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

SIGNATURE



TITLE **REGULATORY ANALYST**

DATE **07/30/2020**

Type or print name

LINDSAY LIVESAY

E-mail address:

llivesay@swrpermian.com

PHONE:

(432) 207-3054

For State Use Only

APPROVED BY:



TITLE **Compliance officer**

DATE **8-7-2020**

Conditions of Approval (if any):

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

BRADENHEAD TEST REPORT

Operator Name <i>Southwest Royalties INC</i>	API Number <i>3.0-015-27398</i>
Property Name <i>Pogo 36 State</i>	Well No. <i>1</i>

Surface Location									
UL - Lot <i>L</i>	Section <i>36</i>	Township <i>25S</i>	Range <i>29E</i>	Feet from <i>2310</i>	NS Line <i>S</i>	Feet from <i>330</i>	E/W Line <i>W</i>	County <i>EDDY</i>	

Well Status									
YES	TA'D WELL <i>(NO)</i>	YES	SHUT-IN <i>(NO)</i>	INJ	INJECTOR <i>(SWD)</i>	OIL	PRODUCER <i>GAS</i>	DATE <i>6-23-2020</i>	

OBSERVED DATA

	(A) Surface	(B) Intern (1)	(C) Intern (2)	(D) Prod Cms	(E) Tubing
Pressure	<i>0</i>			<i>0</i>	<i>300</i>
Flow Characteristics					
Puff	<i>Y/(N)</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/(N)</i>	CO2
Steady Flow	<i>Y/(N)</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/(N)</i>	WTR <i>✓</i>
Surges	<i>Y/(N)</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/(N)</i>	GAS
Down to nothing	<i>Y/(N)</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/(N)</i>	Type of fluid injected for W/O or O/W applies
Gas or Oil	<i>Y/(N)</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/(N)</i>	
Water	<i>Y/(N)</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/(N)</i>	

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

Signature: <i>B. Y. Merchant</i>	OIL CONSERVATION DIVISION
Printed name: <i>M. Y. Merchant</i>	Entered into RBDMS
Title: <i>Production Supervisor</i>	Re-test
E-mail Address: <i>mymerch@penrocoill.com</i>	Accepted for record NMOCD
Date: <i>6-24-2020</i>	DS 8-7-2020
Phone: <i>575-492-1236</i>	
Witness:	

INSTRUCTIONS ON BACK OF THIS FORM

State of New Mexico
Energy, Minerals and Natural Resources Department

Michelle Lujan Grisham
Governor

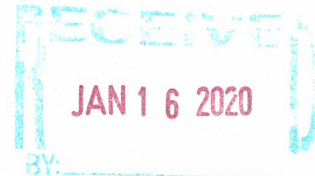
Sarah Cottrell Propst
Cabinet Secretary Designate

Todd E. Leahy, JD, PhD
Deputy Secretary

Adrienne Sandoval
Director
Oil Conservation Division



January 9 2020



Operator:

Under the provisions of NMOCD Rule 19.15.26.10. (A), an operator of an INJECTION or SWD well or producing well in a specially designated area, must maintain and periodically test these wells for mechanical integrity. Your company currently has wells (listed in attachment) which are due for testing during the 2019 calendar year.

Under the provisions of NMOCD Rule 19.15.26.11. (5), you **must verbally** communicate with District 2 personnel to schedule all well testing in order for the test to be witnessed by OCD personnel. The contact for District 2 is Dan Smolik.

Please contact Dan Smolik before the first of the month that these tests are due. You can reach him at the address or phone numbers listed below to schedule the required test as indicated on the attachment.

The attachment indicates what month these tests are due and what type of test is to be performed, Bradenhead or Pressure test. Also attached are instructions for a Bradenhead Test and a Pressure Test.

If you have an Injection or SWD well that is not listed on the attachment, please bring this to my attention.

Thank you for your cooperation. If I can be of further assistance, please contact me.

Dan Smolik
Compliance Officer, NMOCD District II (Artesia)
Office: (575) 748-1283 ext. 103
Cell: (575) 626-0836
Email: danny.smolik@state.nm.us

SOUTHWEST ROYALTIES INC	30-015-04627	NORTH HACKBERRY YATES UNIT #113	A	I	NULL	F	N	24	195	30E	P
SOUTHWEST ROYALTIES INC	30-015-10291	NORTH HACKBERRY YATES UNIT #101	A	I	NULL	F	H	24	195	30E	P
SOUTHWEST ROYALTIES INC	30-015-04618	NORTH HACKBERRY YATES UNIT #105	A	I	NULL	F	H	23	195	30E	P
SOUTHWEST ROYALTIES INC	30-015-27398	POGO 36 STATE #001	A	S	NULL	S	L	36	255	29E	13
SOUTHWEST ROYALTIES INC	30-015-04626	NORTH HACKBERRY YATES UNIT #110	A	I	NULL	F	J	24	195	30E	P

P = Pressure test

B = Bradenhead test

Due February

Instructions to Prepare for MIT Test(s)

All injection wells must be shut in, if the following instructions are not followed.

IMPORTANT NOTE: Make sure the valves are easy to open and close. If the pumper cannot open up a valve for the test, the test will be considered a failure and the well must be shut-in until the test can be re-scheduled. For wells requiring a pressure test, make sure casing valve is ready to hook onto (i.e. Valve has been dug out if necessary, and valve is in good shape, good threads, plugs removed, etc.)

Instructions for Bradenhead Test

1. Requires that injection pump be running at the time of the test and an operable pressure gauge or vacuum gauge installed on the tubing so that the injection pressure may be observed.
 2. Casing & Bradenhead valves must be shut-in 24 hours prior to test.
- This test does not require a pump truck!
 - Please make sure you have enough water to run the injection pump(s) for the duration of the test(s)
 - Test(s) cannot be performed if the conditions of items # 1 & 2 are not met.
 - A company representative must be on location during the test(s) to operate valves and equipment.
-

Instructions for Pressure Test

1. Requires, in addition to the above, a pump truck capable of holding a minimum of 500 psi on the casing for a period of at least 30 minutes. (500 psi for Federal leases.)
 2. A chart recorder is required with a 1000 psi spring, a 60 minute clock, and must have been calibrated within 6 months. Documentation of this calibration must accompany the recorder.
- This test does require a pump truck!
 - Please make sure you have enough water to run the injection pump(s) for the duration of the test(s)
 - Test(s) cannot be performed unless all conditions are met.
 - A company representative must be on location during the test(s) to operate valves and equipment.

If your well(s) fails the test(s); if we are unable to conduct the test(s); or if a representative does not meet us:

You will be required to shut in all injection wells scheduled for testing immediately!