Submit I Copy To Appropriate District Office		f New Me			Form C-1 Revised July 18, 2
District I – (575) 393-6161 Energy, Minerals a 1625 N. French Dr., Hobbs, NM 88240 500 minerals		s and matu	nai resources	WELL API NO.	
<u>District II</u> - (575) 748-1283	OIL CONSERVATION DIVISION			30-015-44054	
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178			5. Indicate Type of Lease		
000 Rio Brazos Rd., Aztec, NM 87410		STATE	🗌 FEE 🛛		
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505			6. State Oil & G	as Lease No.
		EPEN OR PL	UG BACK TO A	7. Lease Name o CEDAR CAN	r Unit Agreement Nam NYON SWD
1. Type of Well: Oil Well Gas Well Other SWD				8. Well Number	1
2. Name of Operator				9. OGRID Numb	per 161968
	TE SWD, INC.				
3. Address of Operator PO BOX 1479 CARLSBAD NM 88220				10. Pool name or Wildcat [96101] SWD; DEVONIAN	
4. Well Location					
Unit Letter <u>P</u>; 1310 fe		-			
Section 8	Township 2		Range 29E		DDY County
	11. Elevation (Show w	vhether DR 929' GR	, RKB, RT, GR, etc.)) 	
	4>	23 GK			
12. Check A	ppropriate Box to I	ndicate N	ature of Notice,	Report or Other	Data
NOTICE OF IN			SUB	SEQUENT RE	
PERFORM REMEDIAL WORK					ALTERING CASING
	CHANGE PLANS	ō	COMMENCE DRI	LLING OPNS.	P AND A
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMENT	ГЈОВ 🗌	
CLOSED-LOOP SYSTEM		-			F
OTHER:			OTHER:		1
 Describe proposed or complete of starting any proposed wor proposed completion or record 	k). SEE RULE 19.15.				
08/10/2017 – Began injection					
					ARTESIA DISTRICT
					NOV 1 3 2017
					RECEIVED
hereby certify that the information a	bove is true and comple	ete to the b	est of my knowledge	e and belief.	
SIGNATURE Alanie	Wison	T	ITLE <u>Regulatory A</u>	Analyst_DATE	<u>10/30/2017</u>
Type or print name <u>Melanie J. Wil</u> For State Use Only					5 <u>1</u>
APPROVED BY: <u>Perturne</u>	INGE TIT	LECOM	MANLE OF	GIGL DA	TE uludiz

Conditions of Approval (if any):