

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

OIL CONSERVATION
ARTESIA DISTRICT

WELL API NO. <u>30-015-32122</u>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name <u>Oxy T-Bone Fed</u>
8. Well Number <u>#1</u>
9. OGRID Number <u>371786</u>
10. Pool name or Wildcat <u>96121 San Andreas</u>

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 SWD

2. Name of Operator
Trinity Environmental SWD 1, LLC

3. Address of Operator
6300 Bridge Point Parkway Building 2, Suite 210 Austin TX 78730

4. Well Location
Unit Letter C : 660 feet from the North line and 1950 feet from the West line
Section 33 Township 18S Range 31E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
GL 3603

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: MIT 54R Test ☒

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.

Pump Truck ARRIVED ON Location, Rigged up and connected to casing back side.
Presented Chart Recorder #1011 & Cal. date doc. 11-1-18
Charged up Well backside casing to 570PSI held pressure for 30 min
Starting Press. 570 / STOP (END) Press 570.
Bleed off Pumping unit and removed Pump Truck.
Placed Unit Back on Injection.

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 Kevin Rogers TITLE Op. Mgr. DATE 11-26-18
Type or print name KEVIN ROGERS E-mail address: KEVIN.ROGERS@TRINITYENV.COM PHONE: 575 200-7896
For State Use Only

APPROVED BY: [Signature] TITLE Compliance officer DATE 12-17-18
Conditions of Approval (if any):