

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) 476-3460  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

RECEIVED

APR 19 2019

State of New Mexico  
Energy, Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

<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.)		WELL API NO. 30-015-44407
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> SWD		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator NGL Water Solutions Permian, LLC		6. State Oil & Gas Lease No.
3. Address of Operator 1509 W Wall Street, Suite 306, Midland, TX 79701		7. Lease Name or Unit Agreement Name Striker 3 SWD
4. Well Location Unit Letter <u>P</u> : <u>472</u> feet from the <u>South</u> line and <u>897</u> feet from the <u>East</u> line Section <u>33</u> Township <u>23S</u> Range <u>28E</u> NMPM County <u>Eddy</u>		8. Well Number <u>1</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3069 GR		9. OGRID Number <u>372338</u>
		10. Pool name or Wildcat SWD: Silurian; Devonian

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 ☐  
1st injection ☐  
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.

6/14/18 First Injection  
MIT performed on 1/29/18. Chart already on file at the OCD

Spud Date:

11/16/17

Rig Release Date:

1/8/2018

SWD-1690

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

SIGNATURE

*Sarah Jordan*

TITLE

Mgr Regulatory Compliance

DATE

3.7.19

Type or print name

Sarah Jordan

E-mail address:

sarah.jordan@nglep.com

PHONE:

432/685-0005 x 1989

For State Use Only

APPROVED BY:

Accepted for record  
NMOCD

DATE

Conditions of Approval (if any):

60 MIN.

