

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

AUG 07 2018

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DISTRICT II-ARTESIA O.C.D.
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 015.44414
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Striker 2 SW D
8. Well Number #1
9. OGRID Number 372338
10. Pool name or Wildcat

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>	
2. Name of Operator NGL Water Solutions Perminian LLC	
3. Address of Operator 1509 W Wall St Ste 300 Midland TX	
4. Well Location Unit Letter <u>D</u> : <u>1025</u> feet from the <u>N</u> line and <u>440</u> feet from the <u>W</u> line Section <u>23</u> Township <u>24S</u> Range <u>31E</u> NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3565 GR</u>	

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 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.

#1
 Drilled to 16750' on 6-24-18. Ran triple combo logs.
 Ran csg crew. Ran 111 jts 7 5/8" Q125 37# VAMSLIS 11
 liner. Circ w/ no gas to surface. Cmt w/ 400 5x5 Class H cmt.
 Well started flowing. Killed w/ mud. Perform injectivity test on
 7/5/16. Wait on Halliburton. Pumped 710 5x5 of 15-8 pps cmt. 63
 lbs to surface. Flow check w/ 15-8 PDH. No gas. Performed another
 cmt job w/ 1500 5x5 DO cmt Retainer at 7-14 cmt. Attempt to run
 CBLON 7-16. →

Spud Date:

4-29-18

Rig Release Date:

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

SIGNATURE

Sarah Jordan

TITLE

Mgr Beg Comp

DATE

8.7.18

Type or print name

Sarah Jordan

E-mail address:

sarah.jordan@naglep.com

PHONE:

432-685-0055

For State Use Only

APPROVED BY:

Accepted For Record
MROCD

TITLE

DATE

8/7/18

Conditions of Approval (if any):

NB