

RECEIVED

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 88201
 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
 Minerals and Natural Resources
 OIL CONSERVATION DIVISION
 DISTRICT II-ARTESIA O.S.D.
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

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.)		WELL API NO. <u>30-015-44414</u>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <u>NGL Water Solutions Permian LLC</u>		6. State Oil & Gas Lease No.
3. Address of Operator <u>1509 W Wall St Ste 302 Midland TX</u>		7. Lease Name or Unit Agreement Name <u>Striker 2 SW D</u>
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>		8. Well Number <u># 1</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3565 GR</u>		9. OGRID Number <u>372338</u>
		10. Pool name or Wildcat

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 checked="" 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.

MIRU. Spud well @ 10Am 4-29-18. Drld to 883.6' POH. RU + Ran 20jts 20" 94# J55 BTC csg. Set csg @ 881' Set w/ 1165 5x5 Class C. CIRC 140 lbs to surface. WOC 84 hrs. Cont drng on 5-4-18. NDA

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 Corp

DATE

5-7-18

Type or print name

Sarah Jordan

E-mail address:

Sarah.jordan@nrglep.com

PHONE:

432-685-2055

For State Use Only

Accepted for record

APPROVED BY:

RM/OCD

TITLE

DATE

8/7/18

Conditions of Approval (if any):