

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

CORRECTED

Form C-103  
 Revised July 18, 2013

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-015-44406
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 1 WD
8. Well Number 1
9. OGRID Number 372338
10. Pool name or Wildcat SWD: Silurian; Devonian

**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

2. Name of Operator  
NGL Water Solutions Permian LLC

3. Address of Operator  
1509 W Wall St, Ste 306, Midland, TX 79701

4. Well Location  
 Unit Letter B : 1016 feet from the North line and 1395 feet from the East line  
 Section 15 Township 23S Range 28E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
2995 GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> 1st int csg & cmt OTHER: <input checked="" 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.  
 12/28/18: Drld 17.5" hole to 2674'. Reached TD on 12/30/18. RU Csg crew on 12/30/18 and ran 67 jts 13-3/8" 68# BTC HCL-80. Set @ 2664' on 12/30/18. Ru cementers on 12/30/18 and cmt as follows: 1450 sxs 13.7 ppg. 2.58 bbls back to surface. Cmt in place at 0700 hrs 12/31/18. Pressure tested to 1271 psi. Held for 4 mins. RD Cementers. WOC. NDA @ 0000 hrs 1/1/19.

Notified of csg and cmt on 12/29/18.

*Relocated*  
*Not Tested For 30 minutes*

*Gc 3/7/19*  
 Accepted for record - NMOCD

RECEIVED

FEB 26 2019

DISTRICT II-ARTESIA O.C.D.

Spud Date: 12/25/18

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 Manager Regulatory Compliance DATE 2/25/19  
 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 TITLE NMOCD DATE \_\_\_\_\_  
 Conditions of Approval (if any):