

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

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

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. 30-025-38822
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other: Acid Gas Injection <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Energy Transfer		6. State Oil & Gas Lease No.
3. Address of Operator 8111 Westchester Drive, Suite 600, Dallas, Texas 75225		7. Lease Name or Unit Agreement Name Jal 3 AGI
4. Well Location Unit Letter <u>E</u> : <u>1550</u> feet from the <u>North</u> line and <u>1000</u> feet from the <u>West</u> line Section <u>33</u> Township <u>24S</u> Range <u>37E</u> NMPM County <u>Lea</u>		8. Well Number #1
11. Elevation (Show whether DR, RKB, RT, GR, etc.): 3268 GR		9. OGRID Number 371183
10. Pool name or Wildcat AGI		

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: (Mechanical Integrity Test) <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.

The MIT was conducted on Tuesday, January 12, 2021 at 1:50 pm (MT). No NMOC representatives were on site due to State Covid-19 guidelines. A Bradenhead Test (BHT) was also performed; below is a step-by-step summary with results:

- The annular space pressure between the production casing and tubing was 52 psi at the casing valve prior to the start of the MIT; treated acid gas (TAG) and water was being injected into the tubing at 402 psi.
- A line from the brine pump truck was attached to the well head valve, with a separate line to a chart recorder, calibrated on 1/11/21. The annular space pressure was bled to 0 psi prior to placing the pen onto the chart.
- At 2:17 pm, brine from the pump truck was added to the annular space which increased the pressure to 600 psi.
- At 2:18 pm the chart recorder and well were isolated from the pump truck and the MIT began.
- During the test, the annular pressure decreased to 590 psi but returned to 595 psi by 2:50 pm (32 minutes) due to an increase in the ambient temperature. This resulted in an overall pressure decrease of 0.8%.
- Brine was then bled from the annular space back to the truck back to 0 psi and the chart was removed from the recorder. An operating pressure of 250 psi was left on the annular space prior to disconnection from the truck.

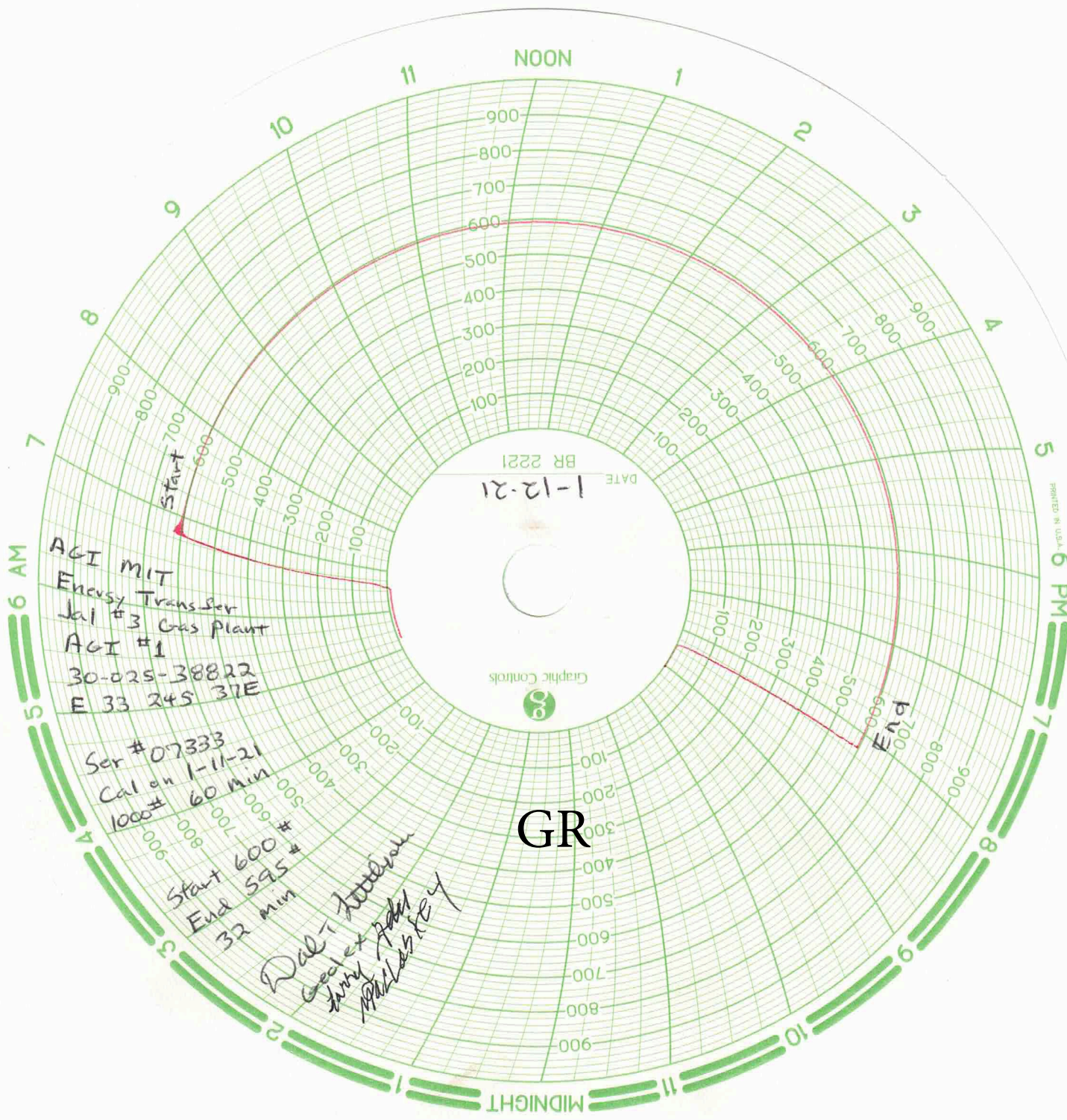
In addition to the MIT, a BHT was conducted by monitoring the surface casing annular space pressure during the MIT. The MIT pressure chart, BHT documentation, and chart recorder calibration sheet are attached.

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

SIGNATURE Dale Littlejohn TITLE Consultant to Energy Transfer DATE 01/13/2021
 Type or print name Dale Littlejohn E-mail address: dale@geolex.com PHONE: (505) 842-8000

For State Use Only

APPROVED BY: Gary Robinson TITLE C/O A DATE 2-1-2021
 Conditions of Approval (if any):



AGI MIT
Energy Transfer
Jal #3 Gas Plant
AGI #1
30-025-38822
E 33 245 37E

Ser #07333
Cal on 1-11-21
1000# 60 min

Start 600 #
End 595 #
32 min

Dale T. Johnson
Geotech
Jury
Millskey

GR

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name Energy Transfer	API Number 30-025-38822
Property Name Jal No.3 Gas Plant AGI	Well No. 001

7. Surface Location

UL - Lot E	Section 33	Township 24-S	Range 37-E		Feet from 1550	N/S Line N	Feet From 1000	E/W Line W	County LEA
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Well Status

TA'D WELL YES	<input type="radio"/> NO	SHUT-IN YES	<input type="radio"/> NO	INJECTOR <input type="radio"/> INJ	SWD	PRODUCER OIL	GAS	DATE 1/12/21
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	0 to 0 psi			52 psi	402 psi
<u>Flow Characteristics</u>					
Puff	Y / N	Y / N	Y / N	Y / N	CO2 ____
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR ____
Surges	Y / N	Y / N	Y / N	Y / N	GAS <u>X</u>
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / N	Injected for
Water	Y / N	Y / N	Y / N	Y / N	Waterflood if applies.

Remarks – Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

AGI Well MIT
Calibration Date: January 11, 2021
Serial No. 07333
1000# 60 minutes

Signature: <i>Dale T Littlejohn</i>	OIL CONSERVATION DIVISION
Printed name: Dale T Littlejohn	Entered into RBDMS
Title: Consultant to Operator	Re-test GR
E-mail Address: dale@geolex	
Date: 1/12/21	Phone: 505/842-8000
	Witness: Larry Felts (Maclaskey)

INSTRUCTIONS ON BACK OF THIS FORM

MACLASKEY OILFIELD SERVICES

5900 WEST LOVINGTON HWY. HOBBS, NM 88240
505-395-1016

THIS IS TO CERTIFY THAT:

DATE: 1-11-2021

I, 1000 PSI METER TECHNICIAN FOR MACLASKEY OILFIELD
SERVICES, INC. HAS CHECKED THE CALIBRATION ON THE FOLLOWING
INSTRUMENT. 1000 PRESSURE RECORDER

SERIAL NUMBER

07333

TESTED AT THESE POINTS.

PRESSURE <u>500</u>			PRESSURE <u>1000</u>		
TEST	AS FOUND	CORRECTED	TEST	AS FOUND	CORRECT
<u>0</u>	<u>100</u>	<u>✓</u>	<u>500</u>	<u>600</u>	<u>✓</u>
<u>100</u>	<u>200</u>	<u>✓</u>	<u>600</u>	<u>700</u>	<u>✓</u>
<u>200</u>	<u>300</u>	<u>✓</u>	<u>700</u>	<u>800</u>	<u>✓</u>
<u>300</u>	<u>400</u>	<u>✓</u>	<u>800</u>	<u>900</u>	<u>✓</u>
<u>400</u>	<u>500</u>	<u>✓</u>	<u>900</u>	<u>100</u>	<u>✓</u>

REMARKS: _____

SIGNED: AR