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

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

Form C-103
Revised July 18, 2013

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WELL API NO. 30-025-21717	
5. Indicate Type of Lease STATE [X] FEE [ ]	
6. State Oil & Gas Lease No. E-9659	
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.)	7. Lease Name or Unit Agreement Name GR Unit
1. Type of Well: Oil Well [ ] Gas Well [X] Other: Storage	8. Well Number 002
2. Name of Operator Enstor Grama Ridge Storage and Transportation, LLC	9. OGRID Number 234255
3. Address of Operator 10375 Richmond Ave., Suite 1900, Houston TX, 77042	10. Pool name or Wildcat Grama Ridge, Morrow
4. Well Location Unit Letter L : 1980 feet from the South line and 660 feet from the West line Section 34 Township 21S Range 34E NMPM Lea County	
	11. Elevation *(Show whether DR, RKB, RT, GR, etc.)* 3,641' GL

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK [ ]	PLUG AND ABANDON [ ]	REMEDIAL WORK [ ]	ALTERING CASING [ ]
TEMPORARILY ABANDON [ ]	CHANGE PLANS [ ]	COMMENCE DRILLING OPNS. [ ]	P AND A [ ]
PULL OR ALTER CASING [ ]	MULTIPLE COMPL [ ]	CASING/CEMENT JOB [ ]	
DOWNHOLE COMMINGLE [ ]			
CLOSED-LOOP SYSTEM [ ]			
OTHER: [ ]		OTHER: [X]	

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.

Pressure Test (MIT) on 8/16/2019
See attached.

Spud Date: | Rig Release Date:

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

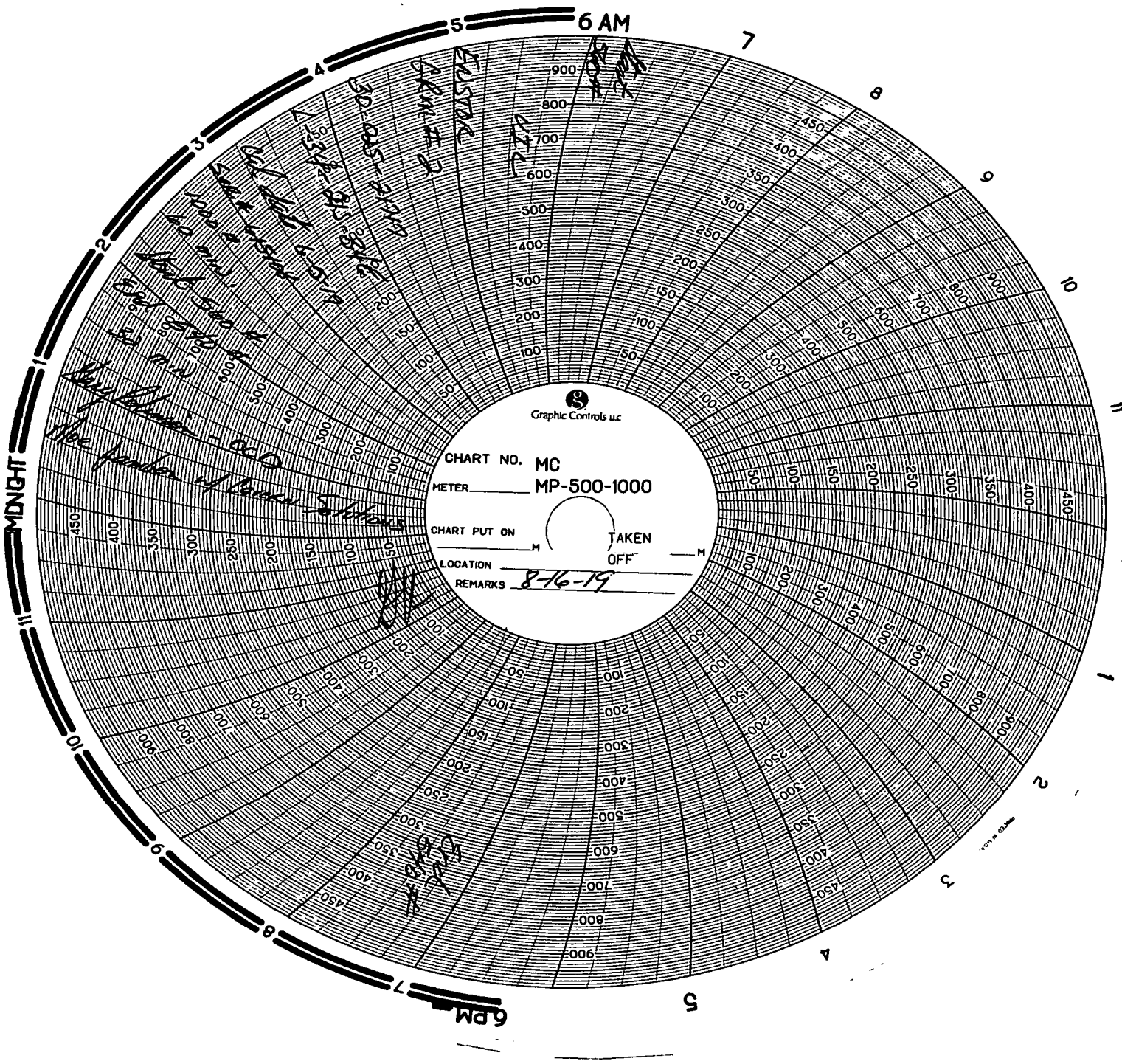
SIGNATURE _____ TITLE Director of Compliance DATE 09/06/2019

Type or print name Todd Cash E-mail address: todd.cash@enstorinc.com PHONE: (281) 374 -3085

For State Use Only

APPROVED BY: _____ TITLE Compliance Officer DATE 9-10-19

Conditions of Approval (if any):


6 AM
NOON
6 PM
MIDNIGHT
Graphic Controls LLC
CHART NO. MC
METER MP-500-1000
CHART PUT ON
TAKEN
LOCATION
OFF
REMARKS 8-16-19

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

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

BRADENHEAD TEST REPORT

Operator Name	API Number
ENSTOR	30-025-21717
Property Name	**Well No.**
GRM	#2

Surface Location

UL - Lot	Section	Township	Range		Feet from	N/S Line	Feet From	E/W Line	County
L	34	21S	34E		1980	S	660	W	LEA

Well Status

TA'D WELL		SHUT-IN		INJECTOR		PRODUCER		DATE
YES	(NO)	YES	(NO)	INJ	SWD	OIL	GAS	8-16-19

GAS Storage Well

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	0	0	N/A	0	3615
Flow Characteristics					CO2 ___
Puff	Y (N)	Y (N)	Y / N	Y (N)	WTR ___
Steady Flow	Y (N)	Y (N)	Y / N	Y (N)	GAS ___
Surges	Y (N)	Y (N)	Y / N	Y (N)	Type of Fluid Injected for Waterflood if applies
Down to nothing	Y / N	Y / N	Y / N	Y / N	
Gas or Oil	Y (N)	Y (N)	Y / N	Y (N)	
Water	Y (N)	Y (N)	Y / N	Y (N)	

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

VTL

Signature:	OIL CONSERVATION DIVISION
Printed name: Moe Jambon	Entered into RBDMS
Title: Field Supervisor	Re-test
E-mail Address: whitney@cavernsolutions.com	
Date: 8/16/19 Phone: 832-865-6644	
Witness: Gary Robinson	

INSTRUCTIONS ON BACK OF THIS FORM

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

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SEP 09 2019
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Energy, Minerals and Natural Resources Department
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name	API Number
Enstor Grama Ridge Storage and Transportation	30-025-39922
Property Name	**Well No.**
GRM Unit	8

Surface Location

UL - Lot	Section	Township	Range		Feet from	N/S Line	Feet From	E/W Line	County
P	4	225	34E		126	S	1248	E	Lea

Well Status

TA'D WELL	SHUT-IN	INJECTOR	PRODUCER	DATE
YES ~~NO~~	~~YES~~ NO	~~NO~~ SWD	OIL GAS	08/15/19

OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	0	0		0	3653
Flow Characteristics					CO2 ___ WTR ___ GAS ✓ Type of Fluid Injected for Waterflood if applies.
Puff	Y / ~~N~~	Y / ~~N~~	Y / N	~~Y~~ / N	
Steady Flow	Y / ~~N~~	Y / ~~N~~	Y / N	Y / ~~N~~	
Surges	Y / ~~N~~	Y / ~~N~~	Y / N	Y / ~~N~~	
Down to nothing	~~Y~~ / N	~~Y~~ / N	Y / N	~~Y~~ / N	
Gas or Oil	Y / ~~N~~	Y / ~~N~~	Y / N	Y / ~~N~~	
Water	Y / ~~N~~	Y / ~~N~~	Y / N	Y / ~~N~~	

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

Signature:		OIL CONSERVATION DIVISION
Printed name: Moe Jambon / JR Marquez		Entered into RBDMS
Title: Field Supervisor / Operator		Re-test
E-mail Address: whitney@cavernsolutions.com		
Date: 8/15/19	Phone: 985-855-6046 / 575-704-4575	
	Witness:	

INSTRUCTIONS ON BACK OF THIS FORM