

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

HOBBS COCD
 JAN 16 2020
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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. 30-025-40448
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 LUCID ENERGY DELAWARE, LLC		6. State Oil & Gas Lease No. NMLC063798
3. Address of Operator 3100 MCKINNON STREET, SUITE 800, DALLAS, TX 75201		7. Lease Name or Unit Agreement Name Red Hills AGI
4. Well Location Unit Letter <u>1</u> : <u>1600</u> feet from the <u>South</u> line and <u>150</u> feet from the <u>Easy</u> line Section <u>13</u> Township <u>24S</u> Range <u>33E</u> NMPM _____ County <u>LEA</u>		8. Well Number #1 9. OGRID Number 372422
		10. Pool name or Wildcat EXPLORATION CHERRY CANYON
11. Elevation (Show whether DR, RKB, RT, GR, etc.): 3580 GR		

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

NOTICE OF INTENTION TO: 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"/>		SUBSEQUENT REPORT OF: 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"/> OTHER: (Mechanical Integrity Test) <input checked="" type="checkbox"/>	
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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 Wednesday, January 15, 2020 at 12:00 pm (MT). Gary Robinson (NMOCD) was on site to witness and approve the test, and conduct a Bradenhead Test. Below is a step-by-step summary and results:

- The annular space pressure between the production casing and tubing was 87 psi at the casing valve prior to the start of the MIT; TAG was being injected at 1,272 psi. Air was bled from the annular space prior to the start of the MIT.
- The annular space pressure valve was closed to the well while attaching a line from the diesel pump truck, with a separate line from the well valve to a chart recorder (calibrated on 1/2/20).
- At 12:35 pm, diesel from the pump truck was added. At 12:43 pm the annular pressure reached 580 psi; the chart recorder and well were isolated from the pump truck. The pressure decreased initially but stabilized.
- The MIT began at 12:48 pm (500 psi) and the chart recorded the annular pressure until 1:20 pm (32 minutes).
- The annular pressure dropped from 500 to 460 psi; a loss of 40 psi (8.0% decrease) by the end of the test.
- Diesel was then bled from the well annulus to the truck. At 425 psi (operation pressure) the valve to the well was shut and the remaining pressure was bled to the truck prior to disconnection of the line and chart.

In addition to the MIT, a Bradenhead test was conducted by the NMOCD by monitoring the intermediate and surface casing annular space pressures. Please see the attached MIT pressure chart (approved by NMOCD), calibration sheet, and Bradenhead test documentation.

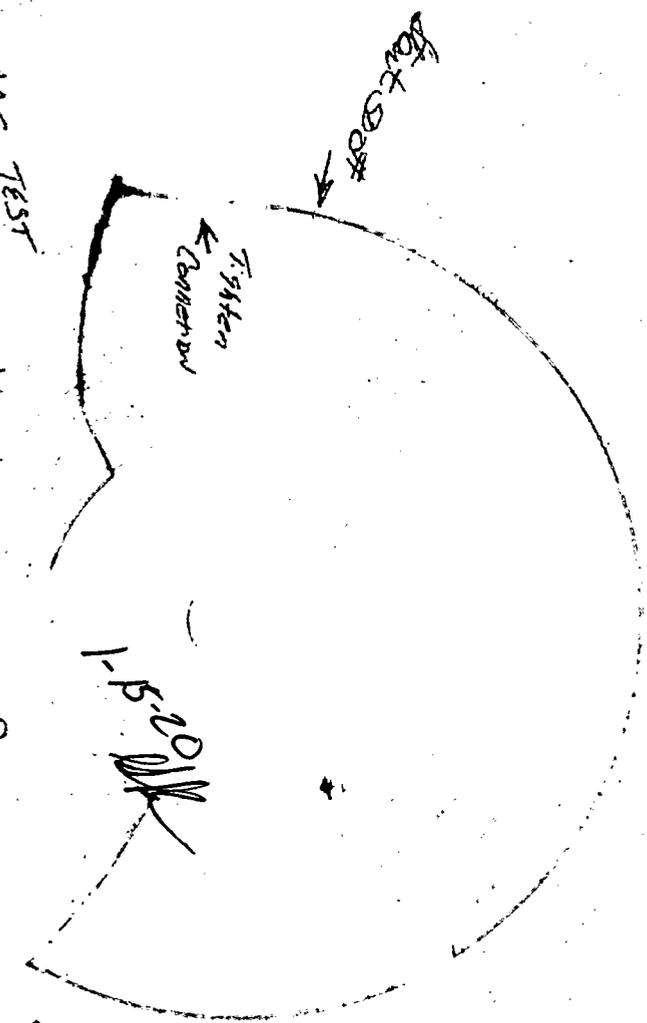
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Dale Littlejohn TITLE Consultant to Lucid Energy DATE 01/16/2020
 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 Compliance Officer DATE 1-16-20
 Conditions of Approval (if any):

AGI TEST
 Local
 Red Hills AGI #1
 30-025-404 #36
 1-13-2015 1-2-20
 Cal date 07333
 Ser # 1000 #
 60 min.
 Start 500 #
 End 460 #
 32 min.
 Gary Robinson - OCD
 JR. of Mackabee
 End 460 #



HC
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 JAN 18 2015

District I
 1625 N French Dr., Hobbs, NM 88240
 Phone (575) 393-6151 Fax: (575) 393-6720

HOBBS OCD

JAN 16 2020

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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 <i>Lucid Energy Delaware</i>		API Number <i>30-025-40448</i>
Property Name <i>Red Hills AGI</i>		Well No. <i>#1</i>

2. Surface Location

Ul. Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>I</i>	<i>13</i>	<i>24S</i>	<i>33E</i>	<i>1600</i>	<i>S</i>	<i>150</i>	<i>E</i>	<i>LEA</i>

Well Status

YES	TA'D WELL <input checked="" type="radio"/> NO	YES	SHUT-IN <input checked="" type="radio"/> NO	<input checked="" type="radio"/> INJ	INJECTOR	SWD	OIL	PRODUCER	GAS	DATE <i>1-15-20</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>0</i>	<i>0</i>	<i>/</i>	<i>87</i>	<i>1272</i>
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR <input type="checkbox"/>
Surges	Y/N	Y/N	Y/N	Y/N	GAS <input checked="" type="checkbox"/>
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	Labelled for
Water	Y/N	Y/N	Y/N	Y/N	Waterhead 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 TEST

Signature:		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date:	Phone:		
Witness: <i>Ray Peterson</i>			

INSTRUCTIONS ON BACK OF THIS FORM

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JAN 16 2020
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MAGLARK OILFIELD SERVICES

10000 10000
10000 10000

DATE: 1-2-20

10000 10000
10000 10000
10000 10000

ORDER NUMBER
02333

TESTED AT THESE POINTS:

PRESSURE 500			PRESSURE 1000		
TEST	AS FOUND	CORRECTED	TEST	AS FOUND	CORRECTED
0	100	/			/
100	200	/			/
200	300	/			/
300	400	/			/
400	500	/			/

REMARKS:

SIGNED: Allye Poley

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