

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-24031
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-5765
7. Lease Name or Unit Agreement Name West Tres Papalotes Penn Unit
8. Well No. 312
9. Pool name or Wildcat Tres Papalotes Penn West

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
Permian Resources, Inc.

3. Address of Operator
P.O. Box 590 Midland, Texas 79702

4. Well Location
Unit Letter I : 2080 Feet From The South Line and 560 Feet From The East Line
Section 31 Township 14S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4145 GR

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☒
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Notified OCD 1/26/98. Set 25 sx plug from 10,275-10,021.
2. Set 25 sx plug from 10,252-9998.
3. Displaced well w/9.5 ppg.salt mud.
4. Set 25 sx plug from 7026-6772'.
5. Set 25 sx plug from 4279-4025'. Tagged plug.
6. Shot 5 1/2 csg. & 3112'. POH & LD csg.
7. Pumped 40 sx from 3162-2977'. Tagged plug.
8. Pumped 40 sx from 2012-1858'.
9. Shot 8 5/8 csg. @ 375'. POH & LD csg.
10. Pumped 110 sx from 447-232. Tagged plug.
11. Pumped 10 sx from 30-surface.
12. Weld on cap & installed well marker.

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

SIGNATURE Randy Bruno TITLE Production Manager DATE 2/19/98
TYPE OR PRINT NAME Randy Bruno TELEPHONE NO. 915-685-0113

(This space for State Use)

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY:

JC CW

[Signature]