

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

Form C-103
 Revised July 18, 2013

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

WELL API NO. 30-015-44388
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. STATE
7. Lease Name or Unit Agreement Name REMUDA BASIN SWD
8. Well Number 1
9. OGRID Number 5380
10. Pool name or Wildcat 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 SWD

2. Name of Operator
XTO ENERGY, INC

3. Address of Operator
6401 HOLIDAY HILL RD, BLDG 5, MIDLAND TX 79705

4. Well Location
 Unit Letter O : 1320 feet from the SOUTH line and 1980 feet from the EAST line
 Section 25 Township 25S Range 29E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3061' GL

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 checked="" 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: <input 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.

XTO Energy, Inc requests permission to revise the surface casing as follows:

Casing Type	Hole Size	Casing Size	Casing Grade	Casing Weight	Setting Depth	Total Sks Cement	TOC
Surface	24	18-5/8	J-55 BTC	87.5	350	458	0

Refer to SWD order or contact Santa Fe RECEIVED

MAY 21 2018

Spud Date: Rig Release Date: DISTRICT II-ARTESIA O.C.D.

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

SIGNATURE Kelly Kardos TITLE Regulatory Coordinator DATE 5/18/18

Type or print name Kelly Kardos E-mail address: kelly_kardos@xtoenergy.com PHONE: 432-620-4374

For State Use Only

DENIED

APPROVED BY: _____ TITLE _____ DATE _____
 Conditions of Approval (if any): _____