Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 State of New Mexico Energy, Migration Research	Lesources Revised July 18, 2013
1625 N. French Dr. Hobbs NM 88240	I WELL API NO. I
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 OIE CONSERWATE OF PLY	/ISION• 30-015-45772 5. Indicate Type of Lease
District III - (505) 334-6178 1220 South St. Francis	STATE FEE STATE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
87505	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAD DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUPROPOSALS.)	
1. Type of Well: Oil Well Gas Well Other	8. Well Number 168H
2. Name of Operator XTO ENERGY, INC.	9. OGRID Number
3. Address of Operator	005380 10. Pool name or Wildcat
6401 HOLIDAY HILL RD, BLDG 5, MIDLAND TX 79707	PURPLE SAGE; WOLFCAMP
4. Well Location	
Unit Letter A : 336 feet from the NORTH 1	
Section 32 Township 25S Ran 11. Elevation (Show whether DR, RKE	
2980' GL	, No, Ott, Cless
12. Check Appropriate Box to Indicate Nature	e of Notice, Report or Other Data
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
	MEDIAL WORK
	MMENCE DRILLING OPNS. □ P AND A □ □ SING/CEMENT JOB □
DOWNHOLE COMMINGLE	
CLOSED-LOOP SYSTEM	IED. COMPLETION OPERATIONS
OTHER: OTHER:	HER: COMPLETION OPERATIONS ent details, and give pertinent dates, including estimated date
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. Fo proposed completion or recompletion	
XTO respectfully submits this sundry notice of completion operations and fir	st oil on the referenced well.
06/21/19 MIRU, Pressure test csg to 7,200 psi 30 mins, good. Open sleeve.	,
07/02/19 Perf and stimulation operations 11,138'-15,545'. Total 31 stages, 1 11,265,396 lbs proppant.	,488 shots, 7,432,875 gals of slickwater, 7,000 gals acid,
07/20/19: Set top of packer @ 10,120 ft, Run 2-7/8 tbg set @ 10,143 ft.	
First Oil: 11/10/19	
Spud Date: 05/10/19 Rig Release Date:	06/16/19
I hereby certify that the information above is true and complete to the best of	my knowledge and belief.
SIGNATURE CHEW KOWELL TITLE Regulato	ry Coordinator 1/14/20 DATE
Type or print name Cheryl Rowell E-mail address:	neryl_rowell@xtoenergy.com PHONE: 432-571-8205
For State Use Only	, ,
APPROVED BY: TITLE 5/4 H Conditions of Approval (if any):	My DATE 1/23/20
	1/30/20 KG