| Submit 3 Copies To Appropriate District Office   | State of New Mexico<br>Energy, Minerals and Natural Resources  |                                   | Form C-103<br>June 19, 2008                                     |  |
|--|--|-----------------------------------|---|--|
| District I 1625 N. French Dr., Hobbs, NM 87240 District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 | OIL CONSERVATION<br>1220 South St. Fra<br>Santa Fe, NM 8   | ancis Dr.                         | WELL API NO. 30–045 5. Indicate Type of STATE 6. State Oil & Ga | x fee 🗆                                    |
| SUNDRY NOTION (DO NOT USE THIS FORM FOR PROPORTION OF THE PROPOSALS.)  1. Type of Well:  | 7. Lease Name of STATE GAS COM  8. Well Number   | r Unit Agreement Name:            |   |  |
| Oil Well Gas Well X  2. Name of Operator   | Other  | · · ·                             |   | t1E<br>er                                  |
| 3. Address of Operator 382 CR 3100 AZTEC, NM 4. Well Location  | 10. Pool name or Wildcat  BASIN DAKOTA   |                                   |   |  |
| Unit Letter G:   | 1520' feet from the NO   | RTH line and                      | 1585' feet fro  | om the <u>EAST</u> line                    |
| Section 32   | Township 31N   | Range 12W                         | NMPM  | County SAN JUAN                            |
|  | 11. Elevation (Show whether 60)  | DR, RKB, RT, GR, et<br>48' CER    | c.)   |  |
| 12. Check A  | appropriate Box to Indicate  | Nature of Notice, l               | Report, or Other  | Data                                       |
| NOTICE OF INT  | ENTION TO:   | SUB                               | SEQUENT RE  | PORT OF:                                   |
| PERFORM REMEDIAL WORK  | PLUG AND ABANDON   | REMEDIAL WORK                     |   | ALTERING CASING                            |
| TEMPORARILY ABANDON  | CHANGE PLANS   | COMMENCE DRILLI                   |   | P AND A                                    |
| PULL OR ALTER CASING DOWNHOLE COMMINGLE  | MULTIPLE COMPL L   | CASING/CEMENT J                   | OB 🗀  |  |
| OTHER: CASING REPAIR - VERBAI  | L APPROVAL X   | OTHER:                            |   |  |
| 13. Describe proposed or complete of starting any proposed work) or recompletion.  | d operations. (Clearly state all persons of the control of the con |                                   |   |  |
| XTO Energy Inc. received w/NMOCD per the attached  | verbal approval to repair  | the casing leaks i                | n this well from  | m Brandon Powell                           |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |  |                                   |   | RCVD DEC 5'12<br>OIL CONS. DIV.<br>DIST. 3 |
| Spud Date:   | Rig Relea  | ase Date:                         |   |  |
| I hereby certify that the information  |  | , ,                               | e and belief.   |  |
| SIGNATURE SHEMY  | & mouse TIT  |                                   | RY ANALYST  | DATE <u>12/3/2012</u>                      |
| Type or print name SHERRY J. MOE   | RROW E-m   | sherry_morrow@xt<br>nail address: | oenergy.com   | _PHONE <u>505-333-3630</u>                 |
| For State Use Only   | 7/   | Deputy Oil &                      |   |  |
| APPROVED BY Conditions of Approval (if any):   |  |                                   | ict #3  | DATE <u>12-14-15</u>                       |
| Conditions of Approval (II ally).  |  | ₽/                                |   |  |

## XTO Verbal Approval Form

|   | Well #  | API#  | County/State                          | XTO Employee Requesting Verbal Approval   |
|---|---|---|---------------------------------------|---|
| State Gas Com BC  | #1E   | 30-045-25562  | San Juan, NM                          | Brian Bentson   |
|   | with an injection rate of 1 BPN                     |   | sing @ 262'. Set casing p             | atch from 262' to surface. Test casing patch. Perfora<br>ement circulates to surface then we will DO & PT the |
| g to 550 for 30 min after cement hard                   |   |   |                                       | entent of cultures to surface their we will be difficult  |
|   |   |   |                                       |   |
|   |   |   |                                       |   |
|   |   |   |                                       |   |
|   |   |   |                                       |   |
|   |   |   |                                       |   |
|   |   |   |                                       |   |
|   | Verbal Approval                                     | Date/Time of  |                                       |   |
| Name of Agency  | Verbal Approval <sup>-</sup><br>Given By            | Date/Time of<br>Verbal Approval                       | · · · · · · · · · · · · · · · · · · · | COA's   |
|   |   |   | Ru                                    | COA's<br>n CBL if cement does not circulate   |
| Name of Agency  | Given By  | Verbal Approval                                       | ·<br>·<br>Ru                          |   |
| Name of Agency  | Given By  | Verbal Approval                                       | Ru                                    |   |
| Name of Agency  NMOCD                                   | Given By  | Verbal Approval                                       | Ru                                    |   |
| Name of Agency  NMOCD  s Pit Permit C144-CLEZ Required? | Given By  Brandon Powell  Verbal Pit Approval Given | Verbal Approval  11/29/2012 - 9:27 a.m.  Date/Time of | Ru                                    | n CBL if cement does not circulate  |