Submit 3 Copies To Appropriate District	State of New M			Form C-103	
Office District I	Energy, Minerals and Natu	aral Resources	WELL API N	June 19, 2008	
1625 N. French Dr., Hobbs, NM 87240 District II				30-045-22765	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.			5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505			STATE FEE		
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa T C, T WIT		6. State Oil &	Gas Lease No.	
87505			<u> </u>		
SUNDRY NOTIC (DO NOT USE THIS FORM FOR PROPE DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)		OR PLUG BACK TO A	7. Lease Nam STATE GAS C	ne or Unit Agreement Name:	
I. Type of Well: Oil Well □ Gas Well 区 Other			8. Well Number		
2. Name of Operator			9. OGRID Number		
XTO Energy Inc.			5380		
3. Address of Operator			10. Pool name or Wildcat		
2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401 4. Well Location			BLANCO MESAVERDE		
4. Well Education					
Unit Letter I ::	1460 feet from the SO	UTH line and	1045 fee	t from the EAST line	
Section 16	Township 31N	Range 12W	NMPM	County san juan	
	11. Elevation (Show whether 60)	·DR, RKB, RT, GR, e 99' GL	tc.)		
12 Check A	ppropriate Box to Indicate		Report or Of	her Data	
12. Check A	ppropriate box to mulcate	nature of notice,	Report, or Ot	ner Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
			DOLQOLIVI		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL		P AND A	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB L	A STATE A STATE STATE OF STATE OF STATE	
DOWNHOLE COMMINGLE				OIL CONS. DIV. DIST. 3	
				wat. w	
OTHER:	· 🗆	OTHER: COMPLETE	ON OF SURFACE	COMMINGLE X	
 Describe proposed or complete of starting any proposed work). or récompletion. 	d operations. (Clearly state all persons SEE RULE 1103. For Multiple				
3/4/2013: Gas production	from the State Gas Com M	#1A and State Gas	Com M #2 was	surface commingled, per	
-	-366, issued by the NMOCD			Dallaco Camanglou, per	
	-				
Spud Date:	Rig Rele	ase Date:			
I however contifue that the information	ahaya ia tuus and aananlata ta th	a heat of my knowledg	ro and baliaf		
I hereby certify that the information	above is true and complete to the	e best of my knowledg	ge and benet.		
SIGNATURE KWSLELDIX	men TIT		DRY ANALYST	DATE3/14/2013	
Type or print name KRISTEN D. LY	V NCH E-n	kristen_lynch@x nail address:		PHONE <u>505-333-3206</u>	
For State Use Only	V. 1.				
11/1/1/1/1/	a (welkens -	Deputy Oil 8		7311 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
APPROVED BY		tle <u>Dis</u> 🍾	trict #3	DATE	
Conditions of Approval (II ally).	/	T			