Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-045-30612 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III STATE FEE 😠 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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.) McDANIEL GAS COM B 1. Type of Well: Oil Well Gas Well X Other 8. Well No. 2. Name of Operator Cross Timbers Operating Company 9. Pool name or Wildcat 3. Address of Operator 2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401 BASIN DAKOTA 4. Well Location 665 NORTH 840 Unit Letter feet from the line and feet from the line Section Township **NMPM** 26 29N Range 10W County SAN JUAN 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 5,524' GR 5,536' RKB 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING** COMMENCE DRILLING OPNS. **TEMPORARILY ABANDON CHANGE PLANS PLUG AND** ABANDONMENT  $\mathbf{x}$ **PULL OR ALTER CASING** CASING TEST AND **MULTIPLE** COMPLETION **CEMENT JOB** OTHER: 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. 7/6/01: Cross Timbers Operating Company (now operating as XTO Energy Inc.) pressure tested 4-1/2" production casing to 2,000 psig. Held OK. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Operations Engineer **SIGNATURE** DATE. 7/26/01 Type or print name RAY MARTIN Telephone No. 505-324-1090 (This space for State use) MENTY GOL & GAS INSPECTOR, DIST. 🚓 BINAL SIGNISIO BY CHAMLEE T. PERREN APPROVED BY TITLE Conditions of approval, if any: