Submit 1 Copy To Appropriate District Office District I – (575) 393-6161 State of New Mexico Energy, Minerals and Natural Resources		Form C-10 Revised July 18, 201		
1625 N. French Dr., Hobbs, NM 88240			WELL API NO. 30-025-24090	
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 AR 0 8 2017 1220 South St. Francis Dr.			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460  Santa Fe, NM 87505			STATE FEE /  6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM E 87505			312479	
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.)			NORTH VAC. ABO UNIT	/
1. Type of Well: Oil Well Gas Well Other			8. Well Number 229	•
2. Name of Operator CROSS TIMBERS ENERGY, LLC /				_
3. Address of Operator 400 WEST 7th STREET, FORT WORTH, TX 76102			10. Pool name or Wildcat NORTH VAC-ABO POOL	
4. Well Location L 2000		, 660		
Unit Letter:	_feet from the S	line and	feet from theline	;
Section 10	Township 17-S Ration (Show whether DR	ange <b>357E</b> . <i>RKB. RT. GR. etc.</i> )	NMPM County LEA	
4063 GL				
12. 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				]
TEMPORARILY ABANDON			LLING OPNS.□ P AND A □ T JOB □	
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM  OTHER:	П	OTHER:	П	1
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.				
3/8/2017				
1) POOH tbg & seal ass'y.				
<ol> <li>Redress SA, hydrtst tbg.</li> <li>Perform prelim. MIT, circ. pkr fluid, MIT csg/pkr.</li> </ol>				
c, . c p. c, cc.	p, 559.		tion of Approval: notify	
			Hobbs office 24 hours	
		prior of	running MIT Test & Chart	
Spud Date: 4/7/1972	Rig Release Da	te: 5/11/1972		
37111012		0/11/10/2		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
Thereby certary that the information above is true and comprete to the best of my knowledge and context				
SIGNATURE TITLE Regulatory Compliance DATE 3/8/2017				
Type or print name LAURA STONE E-mail address: cblaylock@mspartners.c PHONE: 817-334-7882				
For State Use Only A A A A A A A A A A A A A A A A A A A				
APPROVED BY: DATE 5/9/2017 Conditions of Approval (if any):				
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