

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

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| SUNDRY NOTICES AND REPORTS ON WELLS (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.) | | WELL API NO. <u>3D-025-23568</u> |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>INJECTION</u> | | 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator <u>CROSS TIMBERS ENERGY, LLC</u> | | 6. State Oil & Gas Lease No. <u>312479</u> |
| 3. Address of Operator <u>400 W 7TH ST, FORT WORTH, TX 76102</u> | | 7. Lease Name or Unit Agreement Name <u>N VACUUM ABO UNIT</u> |
| 4. Well Location Unit Letter <u>P</u> : <u>660</u> feet from the <u>S</u> line and <u>860</u> feet from the <u>E</u> line Section <u>27</u> Township <u>17-S</u> Range <u>34-E</u> NMPM County <u>LEA</u> | | 8. Well Number <u>145</u> |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>4035 GR</u> | | 9. OGRID Number <u>298299</u> |
| | | 10. Pool name or Wildcat <u>VAC; ABO, NORTH</u> |

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:
REMEDIAL WORK ☒ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: ☐

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.

REMEDIAL WORK PERFORMED; PASSING MIT ATTACHED

5/4/2017

Spud Date:

9/22/1970

Rig Release Date:

10/22/1970

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Connie Blaylock TITLE REGULATORY TECH DATE 5/9/2017

Type or print name CONNIE BLAYLOCK E-mail address: cblaylock@mspartners.com PHONE: 817-334-7882

For State Use Only

APPROVED BY: Mary Brown TITLE AO/II DATE 5/11/2017

Conditions of Approval (if any):

RBDMS-CHART-✓

MB

