Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 1820 BBS OCD Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.	
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 District III – (505) 334-6178 OIL CONSERVATION DIVISION 2 9 2017 1220 South St. Francis Dr.			30-025-23100
			5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 Santa Fe, NM 87505			STATE X FEE
1220 S. St. Francis Dr., Santa Fe, MECEVED			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 X Other			8. Well Number 129
Name of Operator CROSS TIMBERS ENERGY, LLC			9. OGRID Number 298299 (
3. Address of Operator 400 W 7TH ST, FORT WORTH, TX 76102			10. Pool name or Wildcat
4. Well Location			(61760) VACUUM; ABO NORTH
Unit Letter B: 860 feet from the N line and 1980 feet from the E line			
Section 23 Township 17-S Range 34-E NMPM County LEA			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
4028 GR			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLIN			LLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB			JOB
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM			
OTHER:		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.			
proposed completion of recompletion.			
4 MIDLE DOOLL W/ The			
 MIRU PU, POOH w/ Tbg RIH, Set CIBP @ 8420' capped w/ 20' cmt 			
3. Perform MIT and TA well.			
Condition of Approval: notify			
OCD Hobbs office 24 hours			
prior of running MIT Test & Chart			
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Spud Date: 04/14/1969	Rig Release Dat	e: 05/29/196	69
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE (MMILL SUICE REGULATORY TECH DATE 06/09/2017			
Type or print name CONNIE BLAYLOCK E-mail address: cblaylock@mspartners.com PHONE: 817-334-7882			
11/20/2012 An/IT			
APPROVED BY: DATE OF LEGISLATION OF Approval (if any):			

