

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

Form C-103
Revised July 18, 2013

HOBBS OGD RECEIVED SEP 11 2018		CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505	
SUNDRY NOTICES (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. 30-025-24612 ✓	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> INJ		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
2. Name of Operator CROSS TIMBERS ENERGY, LLC ✓		6. State Oil & Gas Lease No. B-1520	
3. Address of Operator 400 W 7TH STREET, FORT WORTH, TX 76102		7. Lease Name or Unit Agreement Name NORTH VAC ABO UNIT ✓	
4. Well Location Unit Letter N : 1030 feet from the S line and 1973.3 feet from the W line Section 13 Township 17-S Range 34-E NMPM County LEA		8. Well Number 219	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 298299 ✓	
		10. Pool name or Wildcat NORTH VAC ABO	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

Rigged up 08/21/2018

POOH w/ tubing and seal assembly. RBIH w/ tubing and new assembly. Sting into packer, pressure test TCA, OK. Sting out, circulate backside with packer fluid. Sting in. Run MIT (no NMOCD witness). Start pressure 380 psig. End Pressure 378 psig.

Spud Date:

01/17/1974

Rig Release Date:

02/08/1974

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

SIGNATURE

Samanntha Angeles

TITLE Regulatory Tech

DATE 09/06/2018

Type or print name Samanntha Angeles

E-mail address: sangeles@mspartners.com

PHONE: 817-334-7747

For State Use Only

APPROVED BY:

Mary Brown

TITLE

AO/I

DATE

9/11/2018

Conditions of Approval (if any):

RBDMS-CHART-r

