

District I - (575) 393-6161

1625 N. French Dr., Hobbs, NM 88240

District II - (575) 748-1283

811 S. First St., Artesia, NM 88201

District III - (505) 334-6178

1000 Rio Brazos Rd., Aztec, NM 87400

District IV - (505) 476-3460

1220 S. St. Francis Dr., Santa Fe, NM

87505

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Revised July 18, 2013

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. 30-025-23568
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> INJECTION		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. 312479
3. Address of Operator 400 W 7TH STREET, FORT WORTH, TX 76102		7. Lease Name or Unit Agreement Name N VACUUM ABO UNIT
4. Well Location Unit Letter P : 660 feet from the S line and 860 feet from the E line Section 27 Township 17-S Range 34E NMPM County LEA		8. Well Number 145
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4035GR		9. OGRID Number 298299
10. Pool name or Wildcat VAC; ABO, NORTH		

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

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

- MIRU
- PU 2-3/8" IPC tubing and Arrowset injection packer. TIH and set packer @ 8,468'.
- L&T Backside. Circulate packer fluid.
- Notify NMOCD and perform MIT.

**Condition of Approval: notify  
OCD Hobbs office 24 hours  
prior of running MIT Test & Chart**

Spud Date:

09/22/1970

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 Samanntha Angeles TITLE Regulatory Technician DATE 02/01/2019

Type or print name Samanntha Angeles E-mail address: sangeles@mspartners.com PHONE: 817-334-7747

**For State Use Only**

APPROVED BY: George Brown TITLE Compliance Supervisor DATE 2/4/19

Conditions of Approval (if any):