	State of New Mexico Energy, Minerals and Natural Resources			Form C-103 Revised July 18, 2013		
District 1 1625 N. French Dr., Hobbs, NM 88240				WELL API NO.		
District II OIL CONSERV	OIL CONSERVATION DIVISION			30-025-31247 5. Indicate Type of Lease		
District III 1220 South	1220 South St. Francis Dr.					
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, District IV	¹⁰ Santa Fe, NM 87505			FE X FE		
1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil	& Gas Lease N	э.	
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			7. Lease Name or Unit Agreement Name: Arrowhead Grayburg Unit			
1. Type of Well: Oil Well 🖄 Gas Well 🗌 Other	Gas Well Other HOBBS OCD			8. Well Number 131		
2. Name of Operator XTO Energy, Inc.	SEP 2 5 2015			9. OGRID Number 005380		
3. Address of Operator 500 W. Illinois St Ste 100 Midland, TX 79701	of Operator			10. Pool name or Wildcat Arrowhead; Grayburg		
4. Well Location	KE	Elver	1			
Unit Letter J : 1980' feet from the	South	line and	2080' f	eet from the Ea	ist line	
Section 36 Township 21S	Range 36		NMPM	County	Lea	
		, KI, GR, El	<i>c.)</i>			
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data						
NOTICE OF INTENTION TO:		SUB	SEQUENT		OF:	
			RMITTING			
					_INJECTION>	
PULL OR ALTER CASING MULTIPLE COMPL		DETI	JRN TO		BDMs	
		CSNC		Dest i and	CHG LOG	
		INT T	-	P&A NR	_P&A R	
CLOSED-LOOP SYSTEM		• •	_	-		
 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. XTO Energy respectfully requests a 1-year extension pending a good MIT chart. 						
a/15/20115						
This Approval of Temperary						
Abandopment Expires						
[]						
Spud Date: R	ig Release Date:		<u> </u>			
I hereby certify that the information above is true and comple	te to the best of	my knowledg	ge and belief.			
SIGNATURE AUPANI Kabadu	<u>l</u> _TITLE_ Reg u	latory Analy	/st	DATE	09/16/2015	
Type or print name Stephanie Rabadue	E-mail addre				432-620-6714	
For State Use Only Malue Hear 2 Dist Connergy.com						
APPROVED BY COMPANY AND TITLE AND DATE 7/28/2015 Conditions of Approval (if any):						
V			00	CT 07 20	15 , ^X	

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