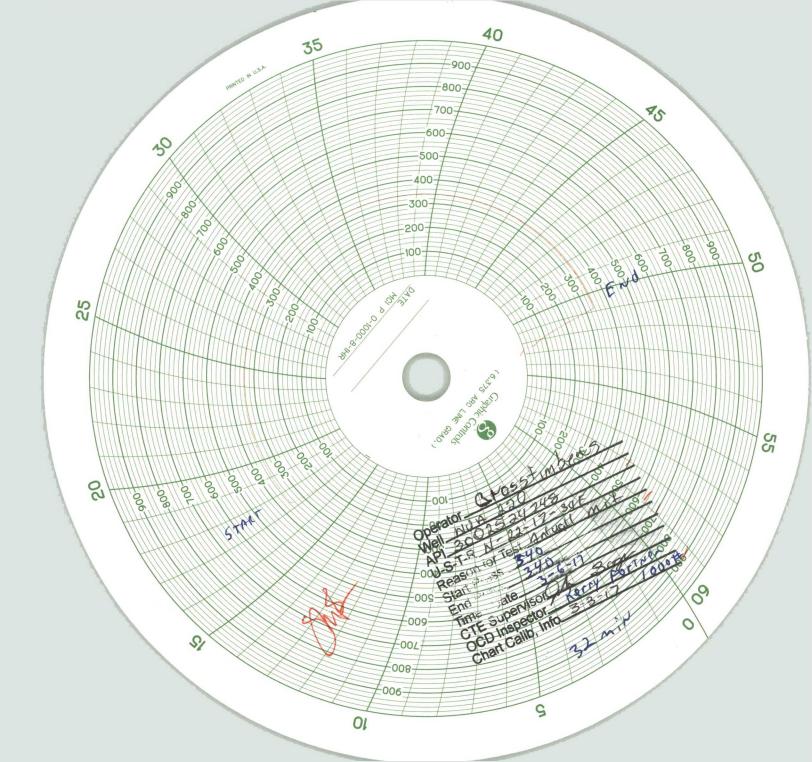
Office District I – (575) 393-6161	Sta	ite of New Me	XICO		Form C	
	Energy, Mir	nerals and Natu	ral Resources	WELL ADINO	Revised July 18	, 2013
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283				WELL API NO. 30-025-24748	R	
811 S. First St., Artesia, NM 88210		SERVATION	Committee of the commit	5. Indicate Type		
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410		South St. Fran		STATE	FEE	
District IV - (505) 476-3460	Sa	nta Fe, NM 87	7505	6. State Oil & G	as Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505				312479		
	TICES AND REPOR	RTS ON WELLS		7. Lease Name o	or Unit Agreement Na	me
(DO NOT USE THIS FORM FOR PROPO				NORTH VAC	ABO	
DIFFERENT RESERVOIR. USE "APPL PROPOSALS.)	ICATION FOR PERMIT	" (FORM C-101) FC	OR SUCH			
1. Type of Well: Oil Well	Gas Well Oth	ner IN		8. Well Number	220	_
2. Name of Operator CROSS TIMBERS ENERG	CV II C			9. OGRID Numb	^{ber} 298299	
3. Address of Operator	OT, LLO			10. Pool name or		
400 WEST 7th STREET, F	FORT WORTH.	TX 76102		NORTH VAC		
4 Well Location						
Unit Letter P	660 feet fro	m the S	line and 860	feet fro	om the E	line
Section 22			inge 34E	NMPM	County LEA	
A CONTRACTOR OF THE PARTY OF TH		1	RKB, RT, GR, etc.)			
				403	85 GL	
12. Check	Appropriate Box	to Indicate N	ature of Notice, I	Report or Other	· Data	
NOTICE OF IN	NTENTION TO:		CLID	SEQUENT RE	DODT OF:	
PERFORM REMEDIAL WORK			REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON			COMMENCE DRIL		P AND A	
PULL OR ALTER CASING			CASING/CEMENT		7,110,71	
DOWNHOLE COMMINGLE						
CLOSED-LOOP SYSTEM						
OTHER:			OTHER:	IIC		х
13. Describe proposed or com	pleted operations. (0	Clearly state all p	pertinent details, and	give pertinent date	es, including estimate	d date
of starting any proposed w		9.15.7.14 NMAC	C. For Multiple Com	ipletions: Attach v	wellbore diagram of	
proposed completion or re-	completion.					
3/6/2017						
5 YR. MIT TEST	E 340. END PF	RESSURE 34	40)			
5 YR. MIT TEST (START PRESSUR		RESSURE 34	40)			
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI		RESSURE 34	40)			
5 YR. MIT TEST (START PRESSUR		RESSURE 34	40)			
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI		RESSURE 34	40)			
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI		RESSURE 34	40)			
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5 YR. MIT TEST (START PRESSUR CHART ATTACHEI		RESSURE 34	40)			
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI		RESSURE 34	40)			
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED)			,			
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI		RESSURE 34	,			
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED)			,			
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED) Spud Date: 5/19/1974		Rig Release Da	te: 7/1/1974	and belief.		
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED)		Rig Release Da	te: 7/1/1974	and belief.		
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED) Spud Date: 5/19/1974		Rig Release Da	te: 7/1/1974			
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED) Spud Date: 5/19/1974		Rig Release Da	te: 7/1/1974		ATE 3/6/2017	
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED) Spud Date: 5/19/1974 I hereby certify that the information SIGNATURE	above is true and co	Rig Release Da omplete to the beTITLE_ Regu l	te: 7/1/1974 est of my knowledge	nce DA		882
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED) Spud Date: 5/19/1974 I hereby certify that the information SIGNATURE Type or print name LAURA STO	above is true and co	Rig Release Da omplete to the beTITLE_ Regu l	te: 7/1/1974 est of my knowledge	nce DA	ATE 3/6/2017 HONE: 817-334-78	882
5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED) Spud Date: 5/19/1974 I hereby certify that the information SIGNATURE	above is true and co	Rig Release Da omplete to the beTITLE_ Regu l	te: 7/1/1974 est of my knowledge	nceDA	HONE: 817-334-78	882
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5 YR. MIT TEST (START PRESSUR CHART ATTACHEI (PASSED) Spud Date: 5/19/1974 I hereby certify that the information SIGNATURE Type or print name LAURA STO For State Use Only	above is true and co	Rig Release Da omplete to the be TITLE Regul E-mail address	te: 7/1/1974 est of my knowledge	nceDA	HONE: 817-334-78	882



<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720

State of New Mexico **Energy, Minerals and Natural Resources Department** Oil Conservation Division Hobbs District Office **BRADENHEAD TEST REPORT**

Operator Name Cross Timber Energy, LLC								^{3.} API Number 30-025-24748						
Property Name									Well No.					
North Vacuum ABO Unit							220							
7. Surface Location														
UL - Lot	Section 22	Town 17		Range 34E			Feet from 1030		S Line SL		Feet From		E/W Line FWL	County Lea
Well Status														
	Well Status SHUT-IN		PRODUCING				3-	-2-17			IN	sector.		
OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH														
OBSERVED DATA If bradenhead flowed water, check all of the descriptions that apply:														
		T	(A)Surf-Interm		(B)Interm(1)-Interm(2)		(C)Interm-Prod		T	(D)Prod Csng		(E)Tubing		
Pressure		1	0		10		W	WA			A		4120	
Flow Characte	eristics					40			- /				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Puff			Y /(N)		Y / (N)		Y / N			Y / (N)				
Steady Fl				/ (N)	Y / (N)			Y / N				(/(N)		
Surges		_			Y / (N)			Y / N Y / N		_			-	
Down to no		-		/ (P)	V (N)			Y / N Y / N		+	Y/N)		-	
Water		_		/ N)	Y / (Ñ) Y / (Ñ)			Y / N		+	Y/N		-	
If bradenhead	flowed was	ter, che	ck all	of the description	ns that ap	pply:								
CLEAR			FRES	Н		SALT	Y		SULFU	R			BLACK	
Remarks:								INTECT	INC ATT	THIC	TIME	,	WTR,	GAS,CO2
Remarks.								INJECT	INGAL	11113	TIME		W I K,	GAS,CO2
	1		_									01100		
Signature:							OIL CONSERVATION DIVISION							
Printed name: Sake Baeza						E	Entered into RBDMS							
Title: Lease Ozerator						1	Re-test A							
E-mail Addres			1		15VC:	5, CC	m					SI	10	
Date: 3-6		1		- , , ,			8134						4	
Witness:														