Submit 1 Copy To Appropriate District Office	State of New Mo			Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.	
District II	OIL CONSERVATION DIVISION		30-025-04607	
District III	1220 South St. Francis Dr.		5. Indicate Type o	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		o. State Oli & Gas	Lease INO.	
	ES AND REPORTS ON WE	LLS MA	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.)			Eunice Monumer	nt South Unit
1. Type of Well: Oil Well Gas Well Other INJECTION			8. Well Number 348	
2. Name of Operator XTO Energy, Inc.			9. OGRID Number 005380	r
3. Address of Operator 500 W. ILLINOIS, SUITE 100			10. Pool name or Eunice Monumer	Wildcat nt;Grayburg-San Andres
4. Well Location				
Unit Letter N :	660 feet from the SOUT	H line and	1980 feet from	m the WEST line
Section 11		0	NMPM	County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUB			SEQUENT REF	PORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLI		P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT JC)В	
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM				
OTHER:		OTHER: MIT		X
 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. 				
05/03/2017: Good MIT test performed. See chart copy attached. Original submitted to the NMOCD.				
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Spud Date:	Rig Relea	ase Date:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Nikki V		LE Regulatory Analy		DATE 05/17/2017
Type or print name Nikki Valenzuel	a E-m	ail address:		PHONE 432-571-8227
yvonne_valenzuela@xtoenergy.com				
APPROVED BY Law Kolunsion TITLE Contrain Offices DATE 6-2-17				
APPROVED BY <u>flow</u> TITLE <u>log llow</u> DATE <u>log - C-11</u> Conditions of Approval (if any):				

