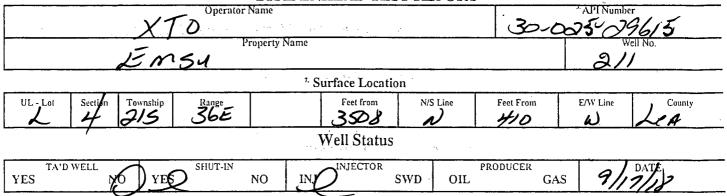
Office	rict	State of N Energy, Minerals ar				Forn Revised Ju	n C-10
District I 1625 N. French Dr., Hobbs, NM 882	.40	,			WELL API	NO.	, 0, 20
District II 1301 W. Grand Ave., Artesia, NM 88		OIL CONSERVATION DIVISION			5 Indiant	30-025-29615	
District III		1220 South					
1000 Rio Brazos Rd., Aztec, NM 874 District IV	110	Santa Fe,	, NM	87505		il & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NN 87505	4				0. State O.	II & Clas Lease 110.	
	10TIC	ES AND REPORTS C	ON WE	LLS		lame or Unit Agreement	Name:
(DO NOT USE THIS FORM FOR DIFFERENT RESERVOIR. USE " PROPOSALS.)	APPLIC	ATION FOR PERMIT" (FO	RM C-10	01) FOR SUCH		onument South Unit	
1. Type of Well: Oil Well		Gas Well 🔲 Other 🕨	njectjo	OBBS OCD	8. Well Ni 211	umber	
2. Name of Operator					9. OGRID		
XTO Energy, Inc.				SEP 27 2018	005380		
3. Address of Operator 6401 Holiday Hill Rd., B	idg 5			RECEIVED		ame or Wildcat onument; Grayburg-Sa	n Andro
4. Well Location							
Unit Letter L		3508 feet from the	North	line and	410	feet from the West	li
Section 4		Township 21S			NMPM	County Lea	
		11. Elevation (Show v	whether	DR, RKB, RT, GR, et	c.)		
		1					
12. Che	ck Ap	propriate Box to Ind	dicate	Nature of Notice, 1	Report, or	Other Data	
NOTICE OF	INITE				SEQUEN		
					SEQUEN		
PERFORM REMEDIAL WORK		PLUG AND ABANDON		REMEDIAL WORK		ALTERING C	ASING
EMPORARILY ABANDON		CHANGE PLANS		COMMENCE DRILLI	NG OPNS.	P AND A	
PULL OR ALTER CASING		MULTIPLE COMPL		CASING/CEMENT J	OB		
DOWNHOLE COMMINGLE							
CLOSED-LOOP SYSTEM							
OTHER:				OTHER: MIT / Brad	enhead		
of starting any proposed v proposed completion or re 9/14/2018: XTO Energy ran a	ecompl	etion.			uons: Attac	n welldore diagram of	
				ase Date:	- <u>-</u>		
	ationa		ete to th	e best of my knowledg			
I hereby certify that the inform	lation, a		ete to th	L		DATE9/21/20	18
I hereby certify that the inform			ete to th TIT E-n	e best of my knowledg LE Regulatory Analy nail address:	vst		
I hereby certify that the inform SIGNATURE <u>Manufactory</u> Type or print name Lincsay D			ete to th TIT E-n	e best of my knowledg TE Regulatory Analy	vst	DATE 9/21/20	
Spud Date: I hereby certify that the inform SIGNATURE <u>Mathematical Solutions</u> Type or print name Lincsay D For State Use Only APPROVED BY Conditions of Approval (if any			ete to th TIT E-n 	e best of my knowledg LE Regulatory Analy nail address:	vst	DATE 9/21/20	

RBDMS-	CHAET-~
	0

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

BRADENHEAD TEST REPORT



OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csng	(E)Tubing
Pressure	Ø	D		0	ð
Flow Characteristics					
Pull	Y / N	Y I A	Y / N	Y/N	CO2
Steady Flow	YIN	×1,20	Y / N	Y I D	WTR GAS
Surges	Y/A	YIN	Y / N	YT N	Type of Fluid
Down to nothing	19/ N	A N	Y/N	۶» ا	Injected for
Gas or Oil	Y / N	Y / K)	Y / N	YT D	Waterflood if applies
Water	+	YT N	Y7 N	Y/3	

Remarks Please state for each string (A,B,C,D,E) pertinent information	regarding bleed down or continuous build up if applies. HOBBS OCD SEP 27 2018	
	RECEIVED	

Signature:	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: 9/17/2 Phone:	
Witness Didowe	

INSTRUCTIONS ON BACK OF THIS FORM

