

Submit 1 Copy To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. <b>30-025-29615</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <b>Eunice Monument South Unit</b>
8. Well Number <b>211</b>
9. OGRID Number <b>005380</b>
10. Pool name or Wildcat <b>Eunice Monument; Grayburg-San Andres</b>

**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 PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☐ Other Injection ☒ **HOBBS OCD**

2. Name of Operator  
**XTO Energy, Inc.** **SEP 27 2018**

3. Address of Operator  
**6401 Holiday Hill Rd., Bldg 5** **RECEIVED**

4. Well Location  
Unit Letter **L** : **3508** feet from the **North** line and **410** feet from the **West** line  
Section **4** Township **21S** Range **36E** 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: **MIT / Bradenhead** ☒

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.

9/14/2018: XTO Energy ran a good MIT & Bradenhead. Chart & Form attached.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Lindsay Deaver TITLE **Regulatory Analyst** DATE **9/21/2018**

Type or print name **Lindsay Deaver** E-mail address: lindsay\_deaver@xtoenergy.com PHONE **432-221-7307**

For State Use Only

APPROVED BY Marky Brown TITLE AO/I DATE 10/1/2018

Conditions of Approval (if any):

R&DMS- CHART-✓

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

BRADENHEAD TEST REPORT

Operator Name <b>XTO</b>		API Number <b>30-0025-29615</b>
Property Name <b>LEMSU</b>		Well No. <b>211</b>

Surface Location

UL - Lot <b>2</b>	Section <b>4</b>	Township <b>21S</b>	Range <b>36E</b>	Feet from <b>3008</b>	N/S Line <b>N</b>	Feet From <b>410</b>	E/W Line <b>W</b>	County <b>LEA</b>
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Well Status

TA'D WELL YES	NO	YES	SHUT-IN NO	NO	INJECTOR IN	SWD	OIL	PRODUCER GAS	DATE <b>9/17/18</b>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>	<b>0</b>	<b>-</b>	<b>0</b>	<b>0</b>
<u>Flow Characteristics</u>					
Pull	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	CO2 <b>—</b>
Steady Flow	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	WTR <b>—</b>
Surges	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	GAS <b>—</b>
Down to nothing	<b>0/N</b>	<b>0/N</b>	<b>Y/N</b>	<b>0/N</b>	Type of Fluid
Gas or Oil	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Injected for
Water	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Waterflood if
					applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

**Post work over**

**HOBBS OCD**

**SEP 27 2018**

**RECEIVED**

Signature:		OIL CONSERVATION DIVISION	
Printed name:		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date: <b>9/17/18</b>	Phone:		
Witness: <b>J. Rowe</b>			

INSTRUCTIONS ON BACK OF THIS FORM

