

Submit 1 Copy To Appropriate District Office  
District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

**HOBBS OCD**  
**OCT 07 2019**  
**RECEIVED**

State of New Mexico  
Energy, Minerals and Natural Resources  
CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>30-025-29169</b>
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator <b>CROSS TIMBERS ENERGY, LLC</b>		6. State Oil & Gas Lease No. <b>312820</b>
3. Address of Operator <b>400 W 7TH STREET, FORT WORTH, TX 76102</b>		7. Lease Name or Unit Agreement Name <b>BRIDGES STATE SEC 24</b>
4. Well Location Unit Letter <b>M</b> : <b>1310</b> feet from the <b>S</b> line and <b>1320</b> feet from the <b>W</b> line Section <b>24</b> Township <b>17-S</b> Range <b>34-E</b> NMPM County <b>LEA</b>		8. Well Number <b>198</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4011 GR</b>		9. OGRID Number <b>298299</b>
		10. Pool name or Wildcat <b>VACUUM; GRAYBURG-SAN ANDRES</b>

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: ☒ MIT ☒

**SUBSEQUENT REPORT OF:**  
REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: ☐

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.

REQUEST TO PERFORM MIT FOR TA EXTENSION APPROXIMATELY SEPT 2,2019

**Condition of Approval: notify  
OCD Hobbs office 24 hours  
prior of running MIT Test & Chart**

Spud Date:

05/03/1985

Rig Release Date:

05/10/1985

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

SIGNATURE

*Samanntha Avarello*

TITLE Regulatory Technician

DATE 09/24/2019

Type or print name Samanntha Avarello

E-mail address: savarello@mspartners.com

PHONE: 817-334-7747

For State Use Only

APPROVED BY:

*Kerry Tate*

TITLE C.O

A

DATE

10-9-19

Conditions of Approval (if any):