| Submit 1 Copy To Appropriate District Office | State of New Mexico | Form C-103 |
|--|---|--|
| District I – (575) 393-6161 | Energy, Minerals and Natural Resource | Revised July 18, 2013 |
| 1625 N. French Dr., Hobbs, NM 88240 | | WELL API NO. 30-025-37283 |
| <u>District II</u> - (575) 748-1283 811 S. First St., Artesia, NM 88210 | OIL CONSERVATION DIVISION | N 50-025-37263 5. Indicate Type of Lease |
| <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | STATE FEE STATE |
| District IV – (505) 476-3460 | Santa Fe, NM 87505 | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | |
| | ICES AND REPORTS ON WELLS | 7. Lease Name or Unit Agreement Name |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | A Arrowhead Grayburg Unit |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other 2. Name of Operator | | · · · · · · · · · · · · · · · · · · · |
| 1. Type of Well: Oil Well | Gas Well Other OCD - HOLD ON STORED | 8. Well Number 360 |
| 2. Name of Operator XTO Energy, Inc | OCO STANDARD RECEIVED | 9. OGRID Number 005380 |
| 3. Address of Operator 6401 Ho | iday Hill, Rd #5 | 10. Pool name or Wildcat |
| Midland, Tx 79707 | | Arrowhead Grayburg |
| 4. Well Location | 1 | Arrowneau Grayburg |
| Unit Letter M : | 1295 feet from the South line as | nd 1230 feet from the West line |
| Section 1 | Township 22S Range 36E | NMPM County Lea |
| | 11. Elevation (Show whether DR, RKB, RT, G | |
| | 3508' GR | |
| 12. Check | Appropriate Box to Indicate Nature of No | otice, Report or Other Data |
| NOTICE OF IN | ITENTION TO: | SUBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL | L WORK ALTERING CASING |
| TEMPORARILY ABANDON | | CE DRILLING OPNS. P AND A |
| PULL OR ALTER CASING | MULTIPLE COMPL CASING/C | EMENT JOB |
| DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM | | |
| OTHER: | ☐ OTHER: | |
| 13. Describe proposed or comp | | ails, and give pertinent dates, including estimated date |
| | ork). SEE RULE 19.15.7.14 NMAC. For Multi | ple Completions: Attach wellbore diagram of |
| proposed completion or rec | ompletion. | |
| XTO Energy, Inc. respectfully submits a subse | quent report of PA operations on the above referenced well. | Condition of Approval: notify |
| 4 MIDITORI | | |
| 2. NDWH, INSTALL BOP. Function and pressure test as per XTO guidelines; | | OCD Hobbs office 24 hours |
| 3. POOH & LD 2-7/8" TBG & ESP; 4. MIRU WL; prior of running MIT Test & Chart | | |
| 5. SET A CIBP @~3,695'; | | |
| POOH LD SETTING TOOL; RIH & SPOT 35 SX OF CMT FRO | OM 3,695'. CALCULATED TOC @~3,660'; | |
| POOH LD BAILER. RD WL; RU PUMP AND PRESSURE TES | T PLUG AND CMT TO 500 PSI PUMP PRESSURE. MONITOR AN | ND CHART TEST FOR MIN OF 20 MINS. |
| IF TEST HOLDS RDMO ALL EQ. | JIPMENT; | · |
| 11. IF TEST FAILS RIH WPKR & PL | UG TO ISOLATE SOURCE OF LEAK NOTIFY ENGINEERING FO | DR PLAN FORWARD. |
| | | |
| | | |
| Spud Date: | Rig Release Date: | |
| | | |
| The share search at the first search in | -Li- 4l | and described as |
| I hereby certify that the information | above is true and complete to the best of my known | owledge and belief. |
| α . α | | |
| SIGNATURE COLOU WI | TITLE Regulatory Analyst | DATE 04/15/2020 |
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| 71 1 | | |
| For State Use Only | E-mail address: <u>cassie e</u> | vans@xtoenergy.com PHONE: 432.218.3671 |
| / 1/ | E-mail address: _cassie_et | vans@xtoenergy.com PHONE: 432.218.3671 |
| APPROVED BY: Conditions of Approval (if any): | E-mail address: _cassie_et | vans@xtoenergy.com PHONE: 432.218.3671 DATE 8-7-70 |

Arrowhead Grayburg Unit #360 (API 30-025-37283) - WELL CLASSIFICATION II

