Submit'3 Copies To Appropriate District State of New Mexico	Form C-103
Submit'3 Copies To Appropriate District Office District HOBBS Energy, Minerals and Natural Resources	June 19, 2008
District II 1625 N. French Dr., Hobbs, NM 87240 District II 1301 W. Grand Ave., Artesia, NM 882 TO CONSERVATION DIVISION 1320 South St. Francis Dr.	WELL API NO. 30-025-04254
1301 W. Grand Ave., Artesia, NM 882 FOC NOTE CONSERVATION DIVISION	5. Indicate Type of Lease
DISTRICT III	STATE 😿 FEE 🗆
District IV RECEIVE	
1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES 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	Eunice Monument South Unit B
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well:	8. Well Number
Oil Well Gas Well Other	8. Well Number
2. Name of Operator	9. OGRID Number
XTO Energy, Inc.	005380
3. Address of Operator	10. Pool name or Wildcat
200 N. Loraine, Ste. 800 Midland, TX 79701	Monument; Grayburg-San Andres
4. Well Location	
Unit Letter M : 660 feet from the South line and	660 feet from the West line
Castian 12 Taywakin 200 Banga 200	NMDM County Tax
Section 13 Township 20S Range 36E NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
11. Elevation (Show whether DR, RRB, RT, OR, etc.)	
12 Cl. 1 A A D. 4 L. L. L. M. A A D. 4 L.	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON	
PULL OR ALTER CASING	OB .
DOWNHOLE COMMINGLE	
OTHER: OTHER: MIT	x
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
10/24/2012: Good MIT test performed. See chart copy attached. Original submitted to the NMOCD.	
,,	
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
a(1)	
	y Analyst DATE 11/10/2012
stephanie rabadue@xtoenergy.com Tura or wint name Stephanie Rabadue E mail address: DHONE 432 620 6714	
Type or print name <u>Stephanie Rabadue</u> E-mail address: PHONE <u>432-620-6714</u>	
For State Use Only FOR RECORD ONLY	
APPROVED BY TITLE	_{DATE} 12.18.2012
Conditions of Approval (if any):	DAIL 10 700

