Submit 3 Copies To Appropriate District  State of New Mexico	Form C-103
Office Energy, Minerals and Natural Resources	June 19, 2008
District I  1625 N. French Dr., Hobbs, NM 8724 BOBBS OCD  District II  OH. CONSEDVATION DIVISION	WELL API NO.
OIL CONSERVATION DIVISION	30-025- 04688 5. Indicate Type of Lease
District III 2014 220 South St. Francis Dr.	
1000 Rio Brazos Rd., Aztec, NM 874101EC Santa Fe, NM 87505	STATE X FEE .
District IV 1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
87505 RECEIVED	
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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	Eunice Monument South Unit
PROPOSALS.)	,
1. Type of Well: 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 L : 2310 feet from the South line and 330 feet from the West line	
Section 16 Township 21S Range 36E  11. Elevation (Show whether DR, RKB, RT, GR, et	
11. Elevation (Snow whether DK, KKB, K1, GK, etc.)	
12 Cheek Ammonriate Poy to Indicate Nature of Natice Papert, or Other Date	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLI	NG OPNS. ☐ P AND A ☐
PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT J	<u> </u>
DOWNHOLE COMMINGLE	
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.	
10/22/2012: Good MIT test performed. See chart copy attached. Original submitted to the NMOCD.	
10/22/2012: Good MIT test performed. See chart copy attached. Original submitted to the NMOCD.	
Spud Date: Rig Release Date:	
Nig Release Date.	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE AND MORE Regulatory Analyst DATE 11/10/2012	
Type or print name Stephanie Rabadue E-mail address: PHONE 432-620-6714	
For State Use Only FOR RECORD ONLY	
APPROVED BY DATE 12.18.2017	
APPROVED BY	

