Submit 3 Copies To Appropriate District  State of New Mexico	Form C-103
Office Energy, Minerals and Natural Re	
	WELL API NO.
District II  District III  Dis	VISION 30-025-12543
District III 1220 South St. Francis	Dr. 5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 17 2012 Santa Fe, NM 87505	STATE X FEE .
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505  OIL CONSERVATION DIV 1220 South St. Francis Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOT CES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLU	IG BACK TO A Famice Monument South Thit
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR PROPOSALS.)	SUCH
1. Type of Well:	8. Well Number
Oil Well Gas Well Other In	144
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	
1000	
Unit Letter G: 1980 feet from the North line and 1950 feet from the East line	
Section 26 Township 200 Pence 207 NMPM County 7	
Section 36 Township 20S Range 36E NMPM County Lea /	
11. Elevation (Snow whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
NOTICE OF INTENTION TO. SUBSEQUENT REPORT OF.	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON	MENCE DRILLING OPNS. P AND A
	NG/CEMENT JOB
	NO/OLIVICINI JOB
DOWNHOLE COMMINGLE	
OTHER:	ER: MIT
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 Dat	e:
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
Atalogai Pohodus	
SIGNATURE TITLE Regulatory Analyst DATE 11/10/2012	
Stephania Pahadaa	mie_rabadue@xtoenergy.com
Type or print name Stephanie Rabadue E-mail address: PHONE 432-620-6714	
For State Use Only	
APPROVED BY DATE 12.18.2012	
APPROVED BY IIILE	DATE 12.18.2012
Conditions of Approval (if any):	

