Submit 3 Copies To Appropriate District State of New Mexico				Form C-103
Office Energy, Minerals and Natural Resources District I			WELL ADINO	Jupe 19, 2008
1625 N. French Dr., Hobbs, NM 87240 District II OH. CONSERVATION DIVISION			WELL API NO. 30-025-3006	53
1301 W. Grand Ave., Artesia, NM 88210 1220 South St. Francis Dr.			5. Indicate Type of Lea	
1000 Rio Brazos Rd., Aztec, NM 87410 CRAS OCD Santa Fe, NM 87505			STATE 🗷	FEE 🗌
District IV. 1220 S. St. Francis Dr., Santa Fe, NM			6. State Oil & Gas Leas	se No.
SUNDRY NOTICES AND REPORTS ON WELLS				
SUNDRY NOTICES AND REPORTS ON WELLS (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.) RECEIVED			7. Lease Name or Unit Monstate	Agreement Name:
1. Type of Well: Oil Well Gas Well X Other			8. Well Number 6	
2. Name of Operator XTO Energy, Inc.			9. OGRID Number 005380	
3. Address of Operator			10. Pool name or Wildcat	
200 N. Loraine, Ste. 800 Midland, TX 79701			Eumont; Yates-7 Rvrs-Queen	
4. Well Location				
Unit Letter				
Section 13	Township 198	Range 36E		ounty Lea_
11. Elevation (Show 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:				
				TERING CASING
TEMPORARILY ABANDON				AND A
PULL OR ALTER CASING				
DOWNHOLE COMMINGLE				
OTHER: Procedure Update		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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
02/21-03/01/2013: DO comt to 1808'. RIH, tag comt @ 3212'.				
03/04/2013: Perf 4 shots @ 2575'. Set pkr @ 2501'. EIR: 1.5 bpm w/2500 psi.				
03/05/2013: RIH w/CICR, set @ 2497'. 03/06/2013: RU cmt equip. Sqze Yates perfs w/400sx 'C' cmt. Sqze press 1500psi. Dump 1.5bbls cmt on CICR.				
03/07/2013: RDPU, will monitor surface csg for 30 days per OCD.				
Spud Date:	Rig Relea	ase Date:	ĺ	
opad Date:				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Stydani Pa	badue TIT	LE Regulator	y Analyst DAT	TE 03/08/2013
Type or print name STEPHANTE RABADUE		stephanie_rabadue@ nail address:	~_	NE <u>432-620-6714</u>
For State Use Only				
APPROVED BY DATE S. 23-201				
Conditions of Approval (if any):			M	AY 2 3 2011
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