Submit 3 Copies To Appropriate District  State of New Mexico	Form C-103
*Office Energy, Minerals and Natural Resources District 1	June 19, 2008 WELL API NO.
1625 N. French Dr., Hobbs, NM 87240 District.II CONSERVATION DIVISION	30-025-32888
District.III Distr	5. Indicate Type of Lease
1000 Dis Danse D.L. Astro NM 07410	STATE X FEE
District LV 1220 S. St. Francis Dr., Santa Fe, NMUL 1 8 2013 87505	6. State Oil & Gas Lease No.
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.)	7. Lease Name or Unit Agreement Name: SEMGSAU
1. Type of Well: Oil Well Gas Well Other Injection	8. Well Number
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	Maljamar; Grayburg-San Andres
4. Well Location	/
Unit Letter M : 1310 feet from the South line and 750 feet from the West line	
Section 29 Township 17s Range 33E	NMPM County Lea
11. Elevation (Snow whether DR, RRB, RT, OR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	x ALTERING CASING □
TEMPORARILY ABANDON	<del></del>
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JO	DR [_]
DOWNHOLE COMMINGLE	
OTHER: Grailed SP	APT, Repair Inj & RWTT
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.	
06/17/2013: MIRU PU. POOH w/tbg & pkr, found pitting. Called Maxey Brown @ 12:06pm for MIT.	
06/18/2013: RIH w/5.5" ASI-X pkr & 2-3/8" tbg. Set pkr @ 4,153'. Circl 100bbls pkr fluid. RU chart recorder. No witness fr NMOCD. Pump out plug, 1500psi. RDMO PU. RWTI.	
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Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE ALDYANÚ Pabadul TITLE Regulatory Analyst DATE 06/28/2013	
stephanie rabadue@	extoenergy.com
Type or print name <u>Stephanie Rabacue</u> E-mail address: PHONE <u>432-620-6714</u>	
APPROVED BY TITLE DIET MARY DATE 7-22-2013	
Conditions of Approval (if any)/	
	JUL 2 4 2017

