

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. <b>30-025-23829</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>312479</b>
7. Lease Name or Unit Agreement Name <b>NORTH VACUUM ABO UNIT</b>
8. Well Number <b>131</b>
9. OGRID Number <b>298299</b>
10. Pool name or Wildcat <b>VACUUM; ABO, NORTH</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4061 GR</b>

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.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐ **INJ**

2. Name of Operator  
**CROSS TIMBERS ENERGY, LLC**

3. Address of Operator  
**400 WEST 7th STREET, FORT WORTH, TX 76102**

4. Well Location  
Unit Letter **B** **770** feet from the **N** line and **1980** feet from the **E** line  
Section **10** Township **17S** Range **34E** NMPM County **LEA**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL. ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: **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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

MIT TEST: 4/16/2014  
400 #, 38 MIN.  
CHART ATTACHED

Spud Date:

09/2/1971

Rig Release Date:

09/26/1971

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*Robbie A. Grigg*

TITLE **REGULATORY COMPLIANCE** DATE **04/23/2014**

Type or print name **ROBBIE A GRIGG**

E-mail address: **rgrigg@mspartners.com** PHONE: **817-334-7842**

**For State Use Only**

APPROVED BY:

*Bill Semanah*

TITLE

*Staff Manager*

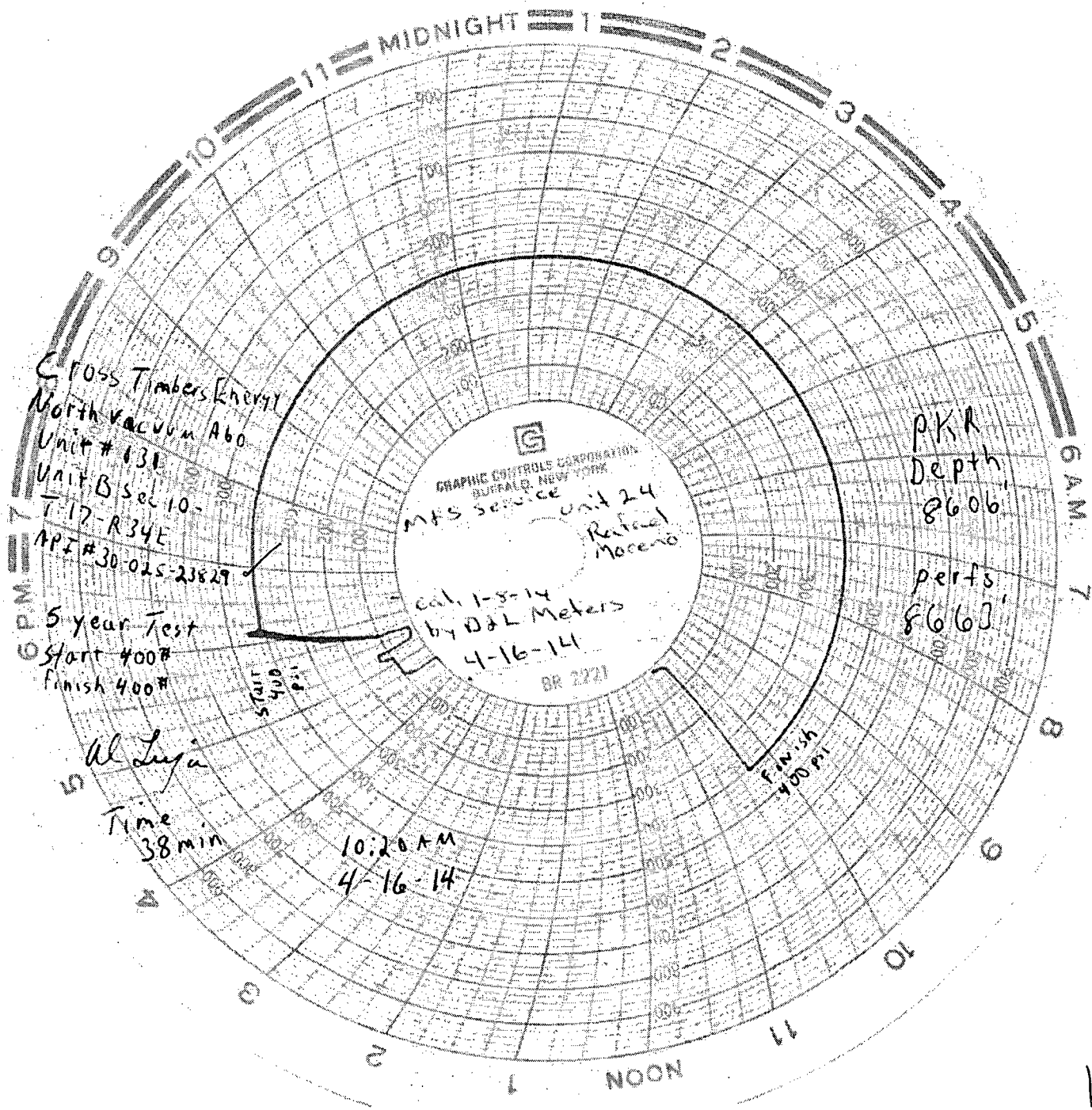
DATE

*4-25-14*

Conditions of Approval (if any):

**FOR RECORD ONLY**

**APR 30 2014**



K