

MAY 22 2014

CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

RECEIVED

WELL API NO.

30-025-25167

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

312507

7. Lease Name or Unit Agreement Name

BRIDGES STATE

8. Well Number 183

9. OGRID Number 298299

10. Pool name or Wildcat
VACUUM;MIDDLE PENN

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 ☐

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 : 910 feet from the NORTH line and 2055 feet from the EAST line
Section 12 Township 17S Range 34E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

4017 GR

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.

RECOMPLETION OPPORTUNITY IS BEING EVALUATED IN THIS WELLBORE.
REQUESTING EXTENSION.

MIT TEST: 5/13/2014
START 525# - END 520#; 35 MIN.
CHART ATTACHED

This Approval of Temporary
Abandonment Expires 11/13/2014
6 months

Spud Date: 11/27/1975

Rig Release Date: 01/22/1976

THIS WELL WAS ORIGINALLY DRILLED AS STATE VV COM #1

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

SIGNATURE

TITLE REGULATORY COMPLIANCE DATE 05/19/2014

Type or print name ROBBIE A GRIGG

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

For State Use Only

APPROVED BY:

TITLE

Dist Supervisor

DATE

5/22/2014

Conditions of Approval (if any)

MAY 27 2014

