Submit 1 Copy To Appropriate District Office HOBBS QCD State of New Mo	
District 1 – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District 11 – (575) 748-1283 MAR 9 0 2015 – CONSERVATION	WELL API NO.
811 S. First St., Artesia, NM 88210 District III - (505) 334-6178	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 RECEIVED Santa Fe, NM 8	7505 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	312471 7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PL DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FO PROPOSALS.)	UG BACK TO A SEMGSAU
1. Type of Well: Oil Well Gas Well Other 2. Name of Operator	8. Well Number 106
CROSS TIMBERS ENERGY, LLC 3. Address of Operator	10. Pool name or Wildcat
400 WEST 7th STREET, FORT WORTH, TX 76102	MALJAMAR; GRAYBURG-SAN A
4. Well Location Unit Letter P : 1040 feet from the S	line and 420 feet from the E line
Section 30 Township 17-S Range 33-E NMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4074 GR	
12 Check Appropriate Pox to Indicate N	ature of Nation Report or Other Data
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK 🔲 PLUG AND ABANDON 🗌	SUBSEQUENT REPORT OF: REMEDIAL WORK
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
CLOSED-LOOP SYSTEM	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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
5 YR. MIT TEST 3/11/15	
(START PRESSURE 350, END PRESSURE 350) Corrected CHART ATTACHED 440、400	
$\frac{1}{2} \frac{1}{2} \frac{1}$	
Spud Date: 4/8/1996 Rig Release Da	ite: 5/15/1996
I hereby certify that the information above is true and complete to the b	est of my knowledge and belief.
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SIGNATURE OUM STOR TITLE Regulatory Compliance DATE 3/18/2015	
Type or print name LAURA STONE E-mail address: rgrigg@mspartners.com PHONE: 817-334-7842	
APPROVED BY: Bill Somanah TITLE Stuff Manager DATE 3/31/2015 Conditions of Approval (if any):	
	APR 0 2 2015
	APR O Z ZUNO

