

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

HOBBS OGD  
FEB 29 2016  
RECEIVED

State of New Mexico  
Energy, Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised July 18, 2013

|  |  |   |
|--|--|---|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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.) |  | WELL API NO.<br>30-025-26462  |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>   |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>CROSS TIMBERS ENERGY, LLC   |  | 6. State Oil & Gas Lease No.<br>312471  |
| 3. Address of Operator<br>400 WEST 7th STREET, FORT WORTH, TX 76102  |  | 7. Lease Name or Unit Agreement Name<br>SOUTHEAST MALJAMAR GB/SA UNIT                               |
| 4. Well Location<br>Unit Letter G : 2615 feet from the N line and 2615 feet from the E line<br>Section 29 Township 17S Range 33E NMPM County LEA   |  | 8. Well Number 507  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)   |  | 9. OGRID Number 298299  |
|  |  | 10. Pool name or Wildcat<br>VACUUM; GRAYBURG-SAN ANDRES   |
|  |  | 4069' GR  |

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

|   |   |  |  |
|---|---|--|--|
| NOTICE OF INTENTION TO:                                 |   | SUBSEQUENT REPORT OF:                            |  |
| PERFORM REMEDIAL WORK <input type="checkbox"/>          | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>           | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input checked="" type="checkbox"/> | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/> | P AND A <input type="checkbox"/>         |
| PULL OR ALTER CASING <input type="checkbox"/>           | MULTIPLE COMPL <input type="checkbox"/>   | CASING/CEMENT JOB <input type="checkbox"/>       |  |
| DOWNHOLE COMMINGLE <input type="checkbox"/>             |   |  |  |
| CLOSED-LOOP SYSTEM <input type="checkbox"/>             |   |  |  |
| OTHER: MIT <input checked="" type="checkbox"/>          |   | OTHER: <input type="checkbox"/>                  |  |

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.

REQUEST TO PERFORM MIT ON WEDNESDAY, MARCH 2nd.

Condition of Approval: notify  
OCD Hobbs office 24 hours  
prior of running MIT Test & Chart

1 YEAR T/A EXT.  
MAB

Spud Date: 12/07/1979

Rig Release Date: 01/20/1980

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 2/26/2016

Type or print name Robbie A Grigg E-mail address: rgrigg@mspartners.com PHONE: 817-334-7842

For State Use Only

APPROVED BY: Maya Brown TITLE Dist Supervisor DATE 2/29/2016

Conditions of Approval (if any):

MAR 01 2016

No Prod Reported - 213 MONTHS

MB