Submit 1 Copy To Appropriate State	of New Me	xico		Form C-103
Submit I Copy To Approphies State of New Mexico Office District I			WELL API NO.	Revised July 18, 2013
District II I Air 0 1 2047011 CONSERVATION DIVISION			30-025-04888	
1000 0 11 0 1			5. Indicate Type	
District IV  1220 South St. Francis Dr. Santa Fe, NM 87505			STATE [	
1220 S. St. Francis Dr., Santa Fe, NM			6. State Oil & G	as Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name o	r Unit Agreement Name:
(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			Arnott Ramsay	
PROPOSALS.)  1. Type of Well: Oil Well  Gas Well  Other			8. Well Number	
2. Name of Operator XTO Energy, Inc.			9. OGRID Number 005380	
3. Address of Operator 500 W. Illinois, Ste 100 Midland TX 79701			10. Pool name or Wildcat Jalmat; Tan-Yates-7 Rivers (Oil)	
4. Well Location				
Unit Letter M : 660 feet from the South line and 660 feet from the West line				
Section 33 Township		9	NMPM	County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUB			SEQUENT RE	EPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK				ALTERING CASING
TEMPORARILY ABANDON X CHANGE PLANS		COMMENCE DRILLING OPNS. P AND A		
PULL OR ALTER CASING MULTIPLE COM	PL 🔲	CASING/CEMENT JO	ов 🗆	
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM		,		
OTHER:		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.				
XTO Energy, Inc respectfully requests an extension to TA the referenced well with the following procedure:				
1. Set CIBP @ 3722'.				
2. Cap w/35' cmt via wireline or 25sxs thru tbg. WOC. Tag.  3. Set CIBP @ 3346'.  COCD Hobbs 25. 24 beauty				
4. Cap w/35' cmt via wireline or 25sxs thru tbg. WOC. Tag.				
5. Run good MIT. prior of running MIT Test & Chart				
A closed-loop system will be used to perform this o	peration.			
Spud Date:	Rig Relea	ase Date:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Atapana Politica TITLE Regulatory Analyst DATE 03/01/2017				
Type or print name Stephanie Rabadue E-mail address: PHONE 432-620-6714				
For State Use Only  APPROVED BY  TITLE  DATE  3 1 2017				
Conditions of Approval (if any):		1		,