Submit 3 Copies To Appropriate District	State of New Me			Form C-103
Office District I	Energy, Minerals and Natu	ral Resources	WELL ADINO	June 19, 2008
1625 N. French Dr., Hobbs, NM 87240 District II			WELL API NO. 30-025-10096	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION	N DIVISION	5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Fra Santa Fe, NM 8	7505	17 STATE 😰 FE	EE X
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Sulta 10, 1411 0	RECEIVE		
87505	EC AND DEDODES ON ME	10		. 27
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.)			7. Lease Name or Unit Agr Arrowhead Grayburg Uni	
1. Type of Well: Oil Well Gas Well Other			8. Well Number 214w	1
2. Name of Operator XTO Energy, Inc.			9. OGRID Number 005380	
3. Address of Operator			10. Pool name or Wildcat	
500 W. Illinois St Ste 100 Midland, TX 79701				
4. Well Location				
Unit Letter 0:	660 feet from the Sou	ith line and	1980 feet from the	East line
Section 7	A	Range 37E	NMPM Count	y Lea
一种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种	11. Elevation (Show whether	DR, RKB, RT, GR, etc	c.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
12. Check Ap	opropriate Box to maleate	rvature of rvotice, i	report, or Other Data	
NOTICE OF INTENTION TO:			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		x ALTER	RING CASING	
TEMPORARILY ABANDON	IPORARILY ABANDON		NG OPNS. P AND	DA 🗆
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT JO		
	MOLTIFLE COMPL	OAGING/OEWENT SC		
DOWNHOLE COMMINGLE				
OTHER:		OTHER:		
	operations. (Clearly state all pe		ve pertinent dates, including e	estimated date
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.				
02/20/2017: MIRU. Load tbg w/4bbls. Test csg to 520psi for 20 mins w/20psi loss. Retest and chart 2nd				
time @ 380psi for 30mins w/10psi loss. CWC 100bbls pkr fluid. Test and chart to 340psi for 30 mins				
w/10psi loss. Contact NMOCD for MIT. 02/21/2017: Run MIT test for NMOCD and chart. Test to 340psi for 30mins w/5psi loss. Test good.				
Good chart attached.				
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 Studence Robodove TITLE Regulatory Analyst DATE 02/27/2017				
Type or print name Stephanie Rabadue E-mail address: PHONE 432-620-6714				
For State Use Only 1 4 L				
1110000000000000000000000000000000000				
APPROVED BY TITLE DATE DATE DATE				
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