Submit 1 Copy To Appropriate District Office State of New Mexico	Form C-103
District I – (575) 393-6161 Energy, Minerals and Natural Resources  1625 N. French Dr., Hobbs 10 S OCD  District II – (575) 748-1283 OCD  OH. CONSERVATION DIVISION	Revised July 18, 2013  WELL API NO. 30-025-20306
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, M 87412 9 2018 District IV – (505) 476-3460 1220 South St. Francis Dr. Santa Fe, NM 87505	STATE X FEE   6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa FECEIVED 87505	o. State on te das Bease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	JOHN D KNOX
1. Type of Well: Oil Well Gas Well Other	8. Well Number 11
2. Name of Operator XTO ENERGY INC.	9. OGRID Number 005380
3. Address of Operator	10. Pool name or Wildcat
6401 HOLIDAY HILL ROAD BUILDING #5 MIDLAND TEXAS 79707  4. Well Location	OIL CNETER BLINBRY
Unit Letter feet from the line and	50 EAST line
Section 10 Township 21S Range 36E  11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM County LEA
11. Elevation (Snow whether DR, RKB, R1, GR, etc.)	
	0.1 5
12. Check Appropriate Box to Indicate Nature of Notice,	
NOTICE OF INTENTION TO: SUB-	SEQUENT REPORT OF:  K
TEMPORARILY ABANDON	LLING OPNS. P AND A
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT DOWNHOLE COMMINGLE	TJOB
CLOSED-LOOP SYSTEM	MOISIN:
OTHER: TA EXTE	
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 A 2-YEAR EXTENSION ON THIS WELL TO ASSESS POTENTIAL AND RIG AVAILABILITY. A COPY OF A GOOD CHART IS ATTACHED RAN ON 05/16/2018.	
This Approval of Temporary	
Abandonment Expires 5/14/2020	
Passanda indication and indication a	of election
Spud Date: Rig Release Date:	
Spud Date:  Rig Release Date:  I hereby certify that the information above is true and complete to the best of my knowledge.	e and belief.
I hereby certify that the information above is true and complete to the best of my knowledge	05/00/0040
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE SIGNATURE PATRICIA DONAL DONA	DATE 05/23/2018
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE TITLE REGULATORY ANALYST PATRICIA_DONALD@X  Type or print name PATRICIA DONALD E-mail address:	DATE 05/23/2018
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE TITLE REGULATORY ANALYST PATRICIA_DONALD@X  Type or print name PATRICIA DONALD E-mail address:	DATE 05/23/2018
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE TITLE REGULATORY ANALYST PATRICIA_DONALD@X  Type or print name PATRICIA DONALD E-mail address:	DATE 05/23/2018

MBDMS-CHART-V

