

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

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.	30-025-23568
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	312479
7. Lease Name or Unit Agreement Name	N VACUUM ABO UNIT
8. Well Number	145
9. OGRID Number	298299
10. Pool name or Wildcat	VAC; ABO, NORTH
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	4035 GR

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH
PROPOSALS.)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> INJECTION
2. Name of Operator CROSS TIMBERS ENERGY, LLC
3. Address of Operator 400 W 7TH ST. FORT WORTH, TX 76102
4. Well Location Unit Letter P : 660 feet from the S line and 860 feet from the E line Section 27 Township 17-S Range 34-E NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4035 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 checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input 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: <input 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.

1. MIRU. Release pkr and POOH w/ packer & tubing.
2. MIRU wireline. Run casing inspection log
3. Establish plan forward for well and notify NMOCD

Spud Date:

09/22/1970

Rig Release Date:

10/22/1970

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Samanntha Angeles TITLE Regulatory Tech DATE 09/24/2018

Type or print name Samanntha Angeles E-mail address: sangeles@mspartners.com PHONE: 817-334-7747

For State Use Only

APPROVED BY: Mary Brown TITLE AO/I DATE 9/25/2018
Conditions of Approval (if any):