		·····							
Submit 1 Copy Office	Submit 1 Copy To Appropriate District State of New Mexico					Form C-103			
District I - (575		Energy,	Minerals and Nat	ural Resources			ed July 18, 2013		
1625 N. French District II - (575	Dr., Hobbs, NM 88240 5) 748-1283				WELL AP	I NO. 30-025-4	15809		
-	Artesia, NM 88210		OIL CONSERVATION DIVISION			5. Indicate Type of Lease			
District III - (50 1000 Rio Brazos	s Rd., Aztec, NM 87410	12	1220 South Spines IDCD			STATE X FEE			
District IV - (50)5) 476-3460		Santa Fe, NM 8		6. State Oi	l & Gas Lease No.			
1220 S. St. Fran 87505	cis Dr., Santa Fe, NM		APF	2 5 2019		312477			
			PORTS ON WELL		7. Lease N	ame or Unit Agree	ement Name		
(DO NOT USE	THIS FORM FOR PRO	POSALS TO DRILL	OR TO DEEPEN OR P	CENED	NEM	MENICO DO C	TATE		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C C SOCH PROPOSALS.)						NEW MEXICO BO STATE			
	/ell: Oil Well 🔀	Gas Well	Other			8. Well Number 9			
2. Name of Operator CROSS TIMBERS ENERGY, LLC						9. OGRID Number 298299			
3. Address o					10. Pool na	10. Pool name or Wildcat			
	•	TH STREET. I	FORT WORTH,	TX 76102	1	UM; BLINEBR	Y (61850)		
4. Well Loca							1 (01000)		
	Letter I	: 2310 fee	t from the S	line and	426 fe	eet from the	E line		
Sect	ion 12			Lange 34-E	NMPM		LEA		
			n (Show whether Di		'c.)				
			3977						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data									
		INTENTION .	τo	l su	RSEQUEN		E.		
NOTICE OF INTENTION TO: SUB PERFORM REMEDIAL WORK D PLUG AND ABANDON REMEDIAL WOR									
= = 1					RILLING OPNS. P AND A				
PULL OR ALTER CASING MULTIPLE C				CASING/CEME	NT JOB				
DOWNHOLE	COMMINGLE [6						
CLOSED-LO	OP SYSTEM		_						
OTHER:				OTHER:	1 •		SPUD 🛛		
			s. (Clearly state all E 19.15.7.14 NMA						
	sed completion or		2E 19.13.7.14 INIVLA	C. For Muniple C	ompletions. A	ttach wendore dia	grain of		
рюро	sea completion of	recompletion.							
	•		4" hole to 1,766"	. RIH w 42 jts o	f 9 5/8 36# J5	55 casing. Circ c	ement to		
surface. Test to 700 psi for 30 mins.									
Γ			1]			
Spud Date:	4/17/20	19	Rig Release D	ate:					
L									

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

signature Jamam Muchaulla	TITLE <u>Regulatory Technician</u>	_DATE	4/23/2019
Type or print name <u>Samanntha Avarello</u>	E-mail address: savarello@mspartners.com	PHONE:	817-334-7747
For State Use Only APPROVED BY: Conditions of Approval (if any):	The sine of		04/29/19