

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1224
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
CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised July 18, 2013

WELL API NO.
~~30-025-34823~~ 04302

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
EUNICE MONUMENT SOUTH UNIT B

8. Well Number 918

9. OGRID Number
005380

10. Pool name or Wildcat

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.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other Injection

2. Name of Operator
XTO ENERGY, INC.

3. Address of Operator
6401 HOLIDAY HILL RD, BLDG 5, MIDLAND TX 79707

4. Well Location

Unit Letter M : 600 feet from the South line and 660 feet from the West line
Section 23 Township 20S Range 36E 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
OTHER: MIT ☒

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

5/1/19 to 5/14/19

POOH w/ tbg & pkr

Isolate leak in 5 1/2" csg, 10 below surface.

Change out 10' of 5 1/2" csg and wellhead.

Acidize

RBH w/ tbg & pkr, pkr set at 3806'

Perform MIT, Kerry Fortner w/ NMOC notified but not present for test.

Return well to injection.

Spud Date:

Rig Release Date:

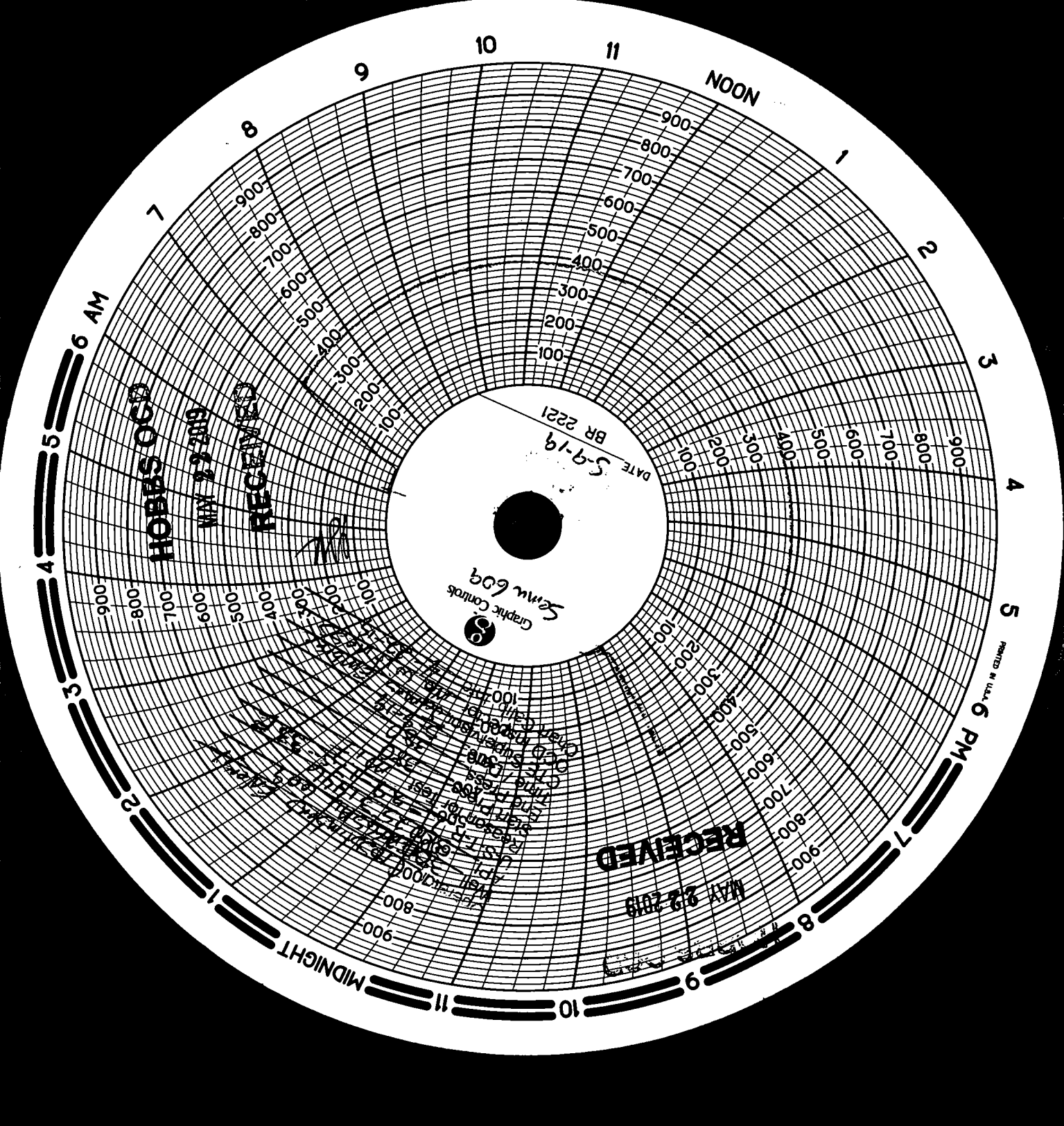
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Cheryl Rowell TITLE Regulatory Coordinator DATE 05/23/2019

Type or print name Cheryl Rowell E-mail address: cheryl_rowell@xtoenergy.com PHONE: 432-571-8205

For State Use Only

APPROVED BY: Cheryl Rowell TITLE Compliance Officer DATE 5-30-19
Conditions of Approval (if any):



HOBBS OGD

MAY 22 2019

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Graphic Controls
Sennu 609

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