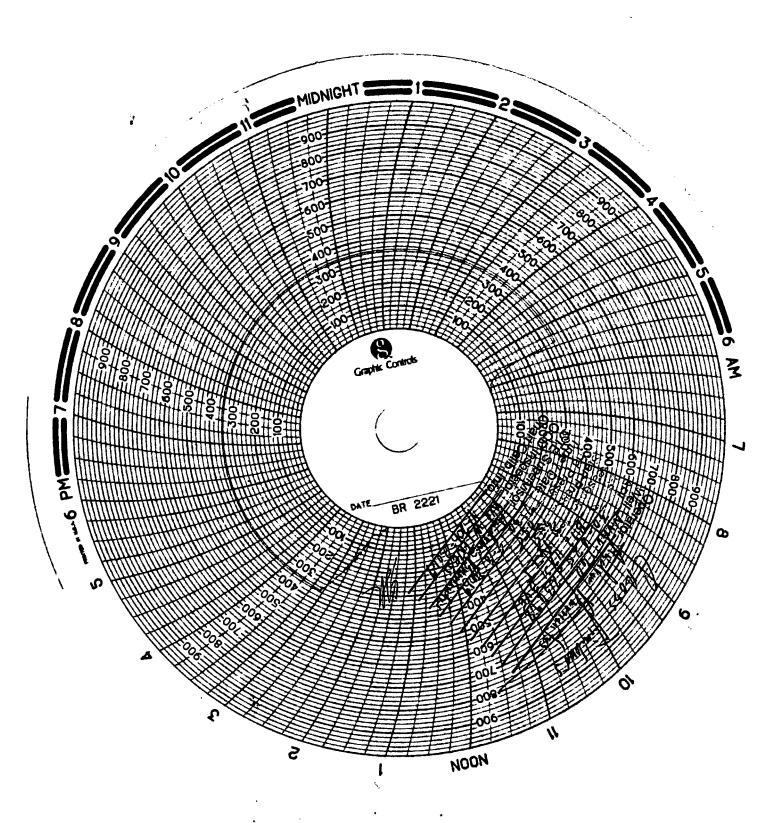
Office	Diute	of New Mex	ICO _		Form C-103						
District I - (575) 393-6161	Energy, Mine	rals and Natura	al Resurces		Revised July 18, 2013						
1625 N. French Dr., Hobbs, NM 88240		•	00	WELL API NO.							
District II - (575) 748-1283	OIL CONSI	ERVATION France	NOISIVIC		30-025-23698						
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	1220 S	outh A France	Ellen si	5. Indicate Type of Le							
1000 Rio Brazos Rd., Aztec, NM 87410	1220 30	D. C. O. C.	The same	STATE X	FEE						
<u>District IV</u> - (505) 476-3460	Sant ICES AND REPORT SALS TO DRILL OR TO CATION FOR PERMIT" (a re, NM	85 TED	6. State Oil & Gas Lea	ise No.						
1220 S. St. Francis Dr., Santa Fe, NM		Mir	-EIN-		212470						
87505	CEC AND DEDORT	CON WELLS	<u>CY</u>	7 I N II-	312479						
SUNDRY NUL	CES AND REPORT	S ON WELL	DACK TO A	7. Lease Name or Unit	Agreement Name						
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC	SALS TO DRILL OR TO CATION FOR PERMIT!! (TEEPEN OK PLUC	SUCH OA		,						
PROPOSALS.)	SATION FOR TERVITE ((PORWIC-101) POR	Socii	<u>NORTH VACU</u>	UM ABO UNIT						
1. Type of Well: Oil Well	Gas Well X Other	r INI	,	8. Well Number	160						
2. Name of Operator	Cab wen Za Cane			9. OGRID Number	100						
	TIMBERS ENER	GV II C		7. OGRAD Number	200200						
3. Address of Operator	TIMBLIO LIVER	GI,LLC		10. Pool name or Wild	298299 /						
-				10. Fool hande of which	icai						
	TH STREET, FO	<u>RT WORTH,</u>	TX 76102								
4. Well Location	/			/							
Unit Letter B /:	600 feet from	the N	line and	1780 feet from the	E line						
	<u> </u>	p 17-S Ran									
Section 12				NMPM Co	unty LEA						
	11. Elevation (Sho	w whether DR, F	KKB, RT, GR, etc.)								
											
12 Check A	Annronriate Rox t	o Indicate Nat	ture of Notice I	Report or Other Data	1						
12. Chook 2	ippropriate Box t	o maioato ma	idio of frotice, i	toport of Other Dau	•						
NOTICE OF IN	ITENTION TO:		SURS	SEQUENT REPOR	RT OF:						
PERFORM REMEDIAL WORK	PLUG AND ABANI	DON 🗆	REMEDIAL WORK	·	ERING CASING						
				_							
TEMPORARILY ABANDON	CHANGE PLANS	ľ	COMMENCE DRIL		ND A						
PULL OR ALTER CASING	MULTIPLE COMPI		CASING/CEMENT	JOB 🗀							
DOWNHOLE COMMINGLE		ľ									
CLOSED-LOOP SYSTEM											
OTHER:			OTHER:		MIT 🔯						
13. Describe proposed or comp	leted operations (Cl			give pertinent dates, inc							
of starting any proposed we											
proposed completion or rec		13.7.14 INIVIAC.	Tor Multiple Con	ipictions. Attach wende	ne diagram of						
proposed completion of rec	ompretion.										
5 VD MIT TEST 05/09/2010											
5 YR MIT TEST 05/08	3/2019										
5 YR MIT TEST 05/08		DE SEE									
5 YR MIT TEST 05/08 START PRESSURE 35		RE 355									
		RE 355									
		RE 355									
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		RE 355									
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		RE 355									
START PRESSURE 35	55, END PRESSU										
	55, END PRESSU	RE 355 Rig Release Date	: 05.	/22/1971							
START PRESSURE 35	55, END PRESSU		: 05.	/22/1971							
START PRESSURE 35	55, END PRESSU		: 05.	/22/1971							
START PRESSURE 35 Spud Date: 04/28/1971	55, END PRESSU	Rig Release Date	05								
START PRESSURE 35	55, END PRESSU	Rig Release Date	05								
START PRESSURE 35 Spud Date: 04/28/1971	55, END PRESSU	Rig Release Date	05								
Spud Date: 04/28/1971 I hereby certify that the information	above is true and con	Rig Release Date	t of my knowledge	and belief.	05/20/2010						
START PRESSURE 35 Spud Date: 04/28/1971	above is true and con	Rig Release Date	05	and belief.	05/29/2019						
Spud Date: O4/28/1971 I hereby certify that the information SIGNATURE manneling.	above is true and con	Rig Release Date nplete to the besi TITLE <u>Regular</u>	t of my knowledge	and beliefDATE							
Spud Date: O4/28/1971 I hereby certify that the information SIGNATURE	above is true and con	Rig Release Date nplete to the besi TITLE <u>Regular</u>	t of my knowledge	and belief.							
Spud Date: O4/28/1971 I hereby certify that the information SIGNATURE manneling.	above is true and con	Rig Release Date nplete to the besi TITLE <u>Regular</u>	t of my knowledge	and beliefDATE							
Spud Date: O4/28/1971 I hereby certify that the information SIGNATURE	above is true and con	Rig Release Date nplete to the best TITLE <u>Regular</u> E-mail address:	t of my knowledge	and beliefDATE artners.com_ PHONE	: 817-334-7747						
Spud Date: O4/28/1971 I hereby certify that the information SIGNATURE	above is true and con	Rig Release Date nplete to the best TITLE <u>Regular</u> E-mail address:	t of my knowledge	and beliefDATE artners.com_ PHONE							
Spud Date: 04/28/1971 I hereby certify that the information SIGNATURE Type or print name Samanntha A For State Use Only	above is true and con	Rig Release Date nplete to the best TITLE <u>Regular</u> E-mail address:	t of my knowledge	and beliefDATE artners.com_ PHONE	: 817-334-7747						



<u>District 1</u>
1625 N French Or , Hobbs, NM 88240
Phone: (\$75) 393-6161 Fax: (\$75) 393-0720

State of New Mexico

Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office BRADENHEAD TEST REPORT

Operator Name Cross Timber Energy, LLC						3. API Number 30-025-23698					
Property Name North Vacuum ABO Unit							Well No.				
North Vacuum ABO Unit 160 1. Surface Location											
UL - Lot B	Section 12	Township 17S	Range 34E	Feet from 660			N/S Line Feet FNL 1		1	E/W Line FEL	County Lea
Well Status											
Well Status SHUT-IN		PRODUCING			4-17-19						
OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH											
OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH OBSERVED DATA If bradenhead flowed water, check all of the descriptions that apply:											
		(A	Surf-Interm			(C)Interm-Prod		<u>od</u>	(D)Prod Csng		(E)Tubing
Pressure									25		30
Flow Characte	eristics								<i></i>		
Puff		1 2	אוע	(V) N			Y / N		Y / (N)]
Steady F	low		Y / (N)	Y / (N)		Y / N			Y / (N)]
Surge			v / (N)		160	Y / N			Y / (N)]
	Down to nothing		(V) N			Y/N		Ø n			
Gas or (Y /(N)		/ (N) /(N)	Y / N			Y /(Ŋ)		_
Water	·		Y /(N)	<u> </u>	<u>'()</u>	Y / N			Y / (N)	j	
If bradenhead	Nowed wa	ter, check al	l of the descriptio	ns that apply:							
CLEAR FRESH		SALTY		SULFUR		R	BLACK				
					1						
Remarks:						INJECT	ING AT	THIS TIME		WTR,	GAS,CO2
											j
						·					
····	-	 									
Signature:						OIL CONSERVATION DIVISION					
Printed name: JULI ESPITUTA						Entered into RBDMS					
Title: PUMIPES						Re-test			\ Y '		
E-mail Addre	SS:										
Date: 4-17	Date: 4-17-19 Phone: 575-631-9608										
Witness:					「						
											

