

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 88220
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.	30-025-29675
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	312507
7. Lease Name or Unit Agreement Name	BRIDGES STATE
8. Well Number	511
9. OGRID Number	298299
10. Pool name or Wildcat	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	4011 GR

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	SWD
2. Name of Operator	CROSS TIMBERS ENERGY, LLC
3. Address of Operator	400 W 7TH STREET, FORT WORTH, TX 76102
4. Well Location Unit Letter O : 474 feet from the S line and 1904 feet from the E line Section 23 Township 17-S Range 34-E NMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4011 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 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: MIT TA EXT <input checked="" 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.

REQUEST TO RUN MIT APPROX 8/15/2019 FOR TA EXTENSION

Condition of Approval: notify
OCD Hobbs office 24 hours
prior of running MIT Test & Chart

Spud Date:

07/24/1986

Rig Release Date:

08/2/1986

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

SIGNATURE Samanntha Avarello TITLE Regulatory Technician DATE 08/06/2019

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

For State Use Only

APPROVED BY: Kerry Int TITLE Compliance Officer A DATE 8-8-19

Conditions of Approval (if any)