

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

REC'D NMOCD  
 12/04/2020

Form C-103  
 Revised July 18, 2013

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

WELL API NO. 30-015-47096	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Remuda South 25 State	
8. Well Number 162H	
9. OGRID Number 005380	
10. Pool name or Wildcat Purple Sage; Wolfcamp	
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 checked="" type="checkbox"/> Other	
2. Name of Operator XTO Energy	
3. Address of Operator 6401 Holiday Hill Rd. Bldg 5, Midland, TX 79707	
4. Well Location Unit Letter <u>F</u> : <u>2355</u> feet from the <u>North</u> line and <u>1920</u> feet from the <u>West</u> line Section <u>25</u> Township <u>23S</u> Range <u>29E</u> NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3074 GR	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/> OTHER: <input type="checkbox"/>	
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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.

11/11/2020 MIRU. Test 8.625 inch casing to 1500 psi for 30 minutes on 11/12/20. Test good. Drill 7.875 inch hole to TD of well at 19001 on 11/20/20. Set 5.5 inch 20 lb CYP-110 casing to 18946. Cement with 485 sx/ 97 bbls/ 1.15 yld 35/65 Poz Lead cement, then 1450 sx/ 301 bbls/ 1.15 yld 35/65 Poz Tail cement. CTOC 6232. Production casing test will be run prior to well completion.

11/22/20 PBDT 18944.

11/24/20 Rig released.

Spud Date: 7/24/20

Rig Release Date: 11/24/20

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

SIGNATURE Melanie Collins TITLE Regulatory Analyst DATE 12/2/20

Type or print name Melanie Collins E-mail address: melanie\_collins@xtoenergy.com PHONE: 432-218-3709

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff Manager DATE 12/9/2020  
 Conditions of Approval (if any):