Submit 3 Copies To Appropriate District	State of I					/	/	Form C-10	03	
Office District I	Energy, Minerals an	nd Natu	ral Resou	rces	77777 7 A	<u></u>	Rev	vised March 25, 19	99	
1625 N. French Dr., Hobbs, NM 87240 District II	OII CONCEDUATION DIVIGION				WELL API NO/ 30*045-31329					
811 South First, Artesia, NM 87210	OIL CONSERVATION DIVISION 2040 South Pacheco				5. Indicate Type of Lease					
District III 1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505				STATE FEE					
District IV	Duited 1 0, 11171 07 0 0					6. State Oil & Gas Lease No.				
2040 South Pacheco, Santa Fe, NM 87505					O. Blate					
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.)					7. Lease Name or Unit Agreement Name: STEDJE GAS COM					
1. Type of Well: Oil Well Gas Well X Other						DIAME GEO COM				
2. Name of Operator					8. Well No.				┪	
XTO Energy Inc.					#3					
3. Address of Operator					9. Pool name or Wildcat				7	
2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401 4. Well Location						BASIN FRUITLAND COAL				
Unit Letter ::	1695 feet from the	NOF	CTH li	ne and	1770	_ feet from	the	WEST lin	ıe	
Section 27	Township	30N	Range	12W	NMPM		Coun	tv san Juan		
	10. Elevation (Show	whether.			c.))))))	
11. Check	Appropriate Box to I			of Notice.	Report o	or Other I	Data Data	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
NOTICE OF INT		iidiodio	'		SEQUE			OE.		
PERFORM REMEDIAL WORK	PLUG AND ABANDO	N 🗆	REMEDIA	AL WORK	OLQOL			RING CASING		
TEMPORARILY ABANDON	CHANGE PLANS		COMMEN	NCE DRILL	ING OPNS.			G AND NDONMENT		
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING CEMENT	TEST AND JOB			ADAI	VDOIVINEIV1		
OTHER:			OTHER:	PT Prod (Csa				X	
12. Describe Proposed or Complet of starting any proposed work) or recompilation.			ertinent de	tails, and g	ive pertiner					
Pressure tested 4-1/2" p	roduction casing to 1	L500 ps:	ig for 30) minutes	on chart	recorder	. Hel	ld OK.		
MAR 2003										
I hereby certify that the information above	ve is true and complete to the	best of r	ny knowled	ge and belie	f.				_	
SIGNATURE COULTE	Steed	TITL	E REGULA	TORY SUPE	RVISOR	D	ATE_	3/18/03	_	
Type or print name DARRIN STEED						Telephon	ıe No.	505-324-1090	_	
(This space for State use)	0		DEPUTY	DIL 8 GAS	inspletor,	len izio	MAR	1 9 2003	_	
APPROVED BY harling	Kerr	TITI		on estern s	no art harby	DA	.TE		_	