

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-045-08003
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> X
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name VALDEZ A
8. Well Number #1
9. OGRID Number 167067
10. Pool name or Wildcat BASIN DAKOTA

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 INC.	
3. Address of Operator 2700 FARMINGTON AVE, SUITE K-1, FARMINGTON, NM 87401	
4. Well Location Unit Letter <u>I</u> : <u>1850</u> feet from the <u>SOUTH</u> line and <u>990</u> feet from the <u>EAST</u> line Section <u>24</u> Township <u>29N</u> Range <u>11W</u> NMPM County <u>SAN JUAN</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: CASING REPAIR ☒ X

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

XTO Energy inc. repaired casing in the following manner:

12/7/04 - 12/16/04: Moved in pulling unit. Removed wellhead. Installed BOP. Tagged PBTD at 6,338' (no fill). TOH w/2-3/8" prod tbg. Set RBP @ 5,986' (121' above DK perfs fr/6,107' - 6,282'). Set packer @ 4,190'. Pressure tested 4-1/2" casing fr/4,190' - 5,986' to 500 psig. Held OK. Set packer @ 3,066'. Pressure tested 4-1/2" casing fr/3,066' - surface to 500 psig. Held OK. Set packer @ 5,000'. Pressure tested 4-1/2" casing from 3,066' - 4,190' to 800 psig. 30 min SIP 335 psig. Old squeezed casing leaks fr/3,256' - 4,076' leaking. TOH w/packer. TIH w/RBP setting tool & released RBP @ 5,986'. TOH w/RBP. TIH w/CIBP. Set CIBP @ 6,071' (36' above top DK perf). TOH w/CIBP setting tool. TIH w/SN & 192 jts 2-3/8" tbg. Circ well with water. Remove BOP. Install wellhead. SWI. Moved off pulling unit. Note: Received verbal permission from Charlie Perrin with NMOCD on 12/14/04 to set plug above DK perforations & leave well SI pending P&A within 90 days. Plug depth OK'd by Steve Hayden with NMOCD.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Holly C. Perkins TITLE REGULATORY COMPLIANCE TECH DATE: 12/16/04

Type or print name HOLLY C. PERKINS E-mail address: Holly_perkins@xtoenergy.com Telephone No. 505-324-1090

For State Use Only

APPROVED BY: Chal TH TITLE Supervisor SUPERVISOR DISTRICT # 3 DATE DEC 21 2004

Conditions of Approval (if any):