Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
District I En	ergy, Minerals and Natural Resou	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-045-25539
1301 W. Grand Ave., Artesia, NM 88210	IL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE FEE
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		NMNM04924
SUNDRY NOTICES AN (DO NOT USE THIS FORM FOR PROPOSALS TO DIFFERENT RESERVOIR. USE "APPLICATION F		7. Lease Name or Unit Agreement Name BISCUIT FEDERAL
PROPOSALS.) 1. Type of Well: Oil Well Gas We	ll X Other	8. Well Number #1
2. Name of Operator XTO ENERGY INC.		9. OGRID Number 167067
3. Address of Operator		10. Pool name or Wildcat
2700 FARMINGTON AVE, SUITE K-1, FARMINGTON, NM 87401		CHOIZA MESA PICTURED CLIFFS
4. Well Location		
Unit Letter B: 860 feet from the NORTH line and 1700 feet from the EAST line		
Section 36 Township 28N Range 04W NMPM County SAN JUAN		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
Pit or Below-grade Tank Application X or Closur	_	
Pit type WORKOVER Depth to Groundwater >100' Distance from nearest fresh water well >1000' Distance from nearest surface water >1000'		
Pit Liner Thickness: 12 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 CHANGE PLANS COMMENCE DRILLING OPNS. PAND A CASING/CEMENT JOB		
OTHER: INSTALL PIT	X OTHER:	П
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 plans to install a lined workover pit for cement and water used during Plug & Abandon procedure. The pit will be		
reclaimed in compliance with NMOCD Guidelines after work is completed on this well.		
		CONTROL OF THE PROPERTY OF THE PARTY OF THE
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 Wolly C. Ten	Lins TITLE REGULATE	ORY COMPLIANCE TECH_DATE 3/8/05
Type or print name E-mail address: Regulatory@xtoenergy.com Telephone No. 505-324-1090		
For State Use Only		
APPROVED BY: Leny to	M TITLE	DATE DATE
Conditions of Approval (if any)		