Submit 3 Copies To Appropriate District	→State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resou	rces May 27, 2004
1625 N. French Dr., Hobbs, NM 87240		WELL API NO.
District II	OIL CONSERVATION DIVIS	ION 30-045-31770
1301 W. Grand Ave., Artesia, NM 88210	1220 South St. Francis Dr.	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE 🔀
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	19 (0 C) Q 3	6. State Oil & Gas Lease No.
SUNDBY NOTICE	S AND REPORTS ON WELLS	
I (DO NOT USE THIS FORM FOR PROPOS	SALS TO DRILL OR TO DEEPEN OR PLUB A TION FOR PERMIT" (FORM C 101) FOR SU	ACK TO A CH QUINE GAS COM
1. Type of Well:		8. Well Number
Oil Well Gas Well X	Other	#3
2. Name of Operator	<b>'</b> 2'0,	9. OGRID Number
XTO Energy Inc.	<u> </u>	167067
3. Address of Operator		10. Pool name or Wildcat
	K. Ste 1 Farmington, NM 87401	BASIN FRUITLAND COAL
4. Well Location		
Unit Letter I :		
Section 31	Township 30N Range	12W NMPM County SAN JUAN
	11. Elevation (Show whether DR, RKB,	RT, GR, etc.)
Pit or Below-grade Tank Application or Closure		
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water		
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material		
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12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
• -		· _
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDI	AL WORK ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COMME	NCE DRILLING OPNS. DPLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE CASING CEMENT	TEST AND   I JOB
OTHER:	C) OTHER	PRESSURE TEST PRODUCTION CASING
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. pressure tested 5-1/2" production casing on 3/12/05 to 1500 psig for 30 minutes on chart. Tested OK.		
rested ur.		
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 permitor an (attached) alternative OCD-approved plan		
SIGNATURE SIGNATURE	(	
, , ,	TITLE REC	FULATORY COMPLIANCE TECH DATE 5/19/2005
O	E-mail addres	SS: Regulatory@xtoenergy.com
Type or print name HOLLY C. PERKI	E-mail addres	
Type or print name HOLLY C. PERKI	E-mail addres	Regulatory@xtoenergy.com Telephone No. 505-324-1090
	E-mail addres	SS: Regulatory@xtoenergy.com