Submit 3 Copies To Appropriate District Office	State of New Me			Form C-103
District I	Energy, Minerals and Natur	rai Resources	WELL API NO.	May 27, 2004
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONSERVATION	NDIVISION	30-045-33145	
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Fra		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 8		STATE 🛛 FE	EE 🗆
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	,	,	6. State Oil & Gas Lease N	0.
SUNDBY NOTIC	ES AND DEDODES ON WE	10	7 Y NY TY-'- A	
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 Agr STATE GAS COM	eement Name:
1. Type of Well:			8. Well Number	
Oil Well Gas Well X	Other		9. OGRID Number	
2. Name of Operator XTO Energy Inc.			9. OGRID Number 167067	
3. Address of Operator			10. Pool name or Wildcat	
2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401			BASIN DAKOTA/BLANCO MESAVERDE	
4. Well Location				
Unit Letter	1975 feet from the SO	JIH line and	1545 feet from the	EAST line
Section 32	Township 31N	Range 12W	NMPM Count	y san juan
	11. Elevation (Show whether	DR, RKB, RT, GR, et		ATTON.
Pit or Below-grade Tank Application or Closure				
Pit type Depth to Groundwater		h water well Die	tonce from nearest surface water	JAA.
Pit Liner Thickness: mil			F. *	AECE SUUB
TH Liner Thickness:	Delow-Grade Tallk: Volume	bbis; Construction	IN INTACEINAL	COMO
				DIST. 3
12. Check A	Appropriate Box to Indicate	Nature of Notice,	Report, or Other Datas	'. S
NOTICE OF INT		SUB	SEQUENT REPORT	OF CHANNE
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🗌	REMEDIAL WORK	ALTEI	RING CASING [
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLI		AND IDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AND		DOMINENT
		OLIVILIA TOO		
OTHER: SQUEEZE CMT	X	OTHER:		
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.				
	ta, XTO requests permissio			
	680'. Squeeze perforation			
	ficient cement to cover th			
	n after the squeeze to con			
done. After the cement squeeze work the MV will perforated from approx. 4,645'-4,902', acidized w/1,000 gal. 15% HCl and fracture treated w/ +/- 125,000 gal. 60Q N2 foam frac fluid carrying +/- 135,000# 20/40				
	ween the MV and DK will be			
initial completion.	Λ			3
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	1 10 1		OMPLIANCE TECH DATE	
_	E-1		egulatory@xtoenergy.com	
Type or print name HOLLY C. PERKINS Telephone No. 505-324-1090				
For State Use Only		DEPUTY OIL & GAS II	NSPECTOR DIST. A. J	AN 0 9 2006
APPROVED BY H. Villani	reva TI	TLE	DATE	-
Conditions of Approval, if any:				