Submit 1 Copy To Appropriate District Office	Engage Minarals and Natural Resources		Form C-103 Revised July 18, 2013	
<u>District I</u> – (575) 393-6161 Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240		WELL API NO.		
District II - (575) 748-1283	OIL CONSERVATION	N DIVISION	300-39-06615	
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		5. Indicate Type of Lease STATE X FEE	
Santa Fe, NM 87505 1005 NR Blazos Rd., Azec, NM 87505 Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 137505		6. State Oil & Gas Lease No. NMSF-079162		
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			7. Lease Name or Unit Agreement Name MKL	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well X Other			8. Well Number # 13	
2. Name of Operator			9. OGRID Number	
Cross Timbers Energy LLC. 3. Address of Operator		298299 10. Pool name or Wildcat		
36 Road 350 Flora Vista, NM 87415			South Blanco Pictured Cliffs	
4. Well Location				
Unit Letter_A_ :_	782_feet from the	N_ line and	466_feet from theEline	
Section 7		Range 7V		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6,563' GR				
THE PERSON NAMED IN COLUMN 2 I	0,303 GR			
12. Check A	ppropriate Box to Indicate	Nature of Notice	Report or Other Data	
			BSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK TEMPORARILY ABANDON			RK	
DOWNHOLE COMMINGLE				
CLOSED-LOOP SYSTEM		The State of		
OTHER:			ell In and Inactivate	
	rk). SEE RULE 19.15.7.14 NMA		nd give pertinent dates, including estimated date ompletions: Attach wellbore diagram of	
Cross Timbers Energy LLC., has shu	t in and inactivated MKL 13 @ 1	0:00 AM 10/14/201	5. OIL CONS. DIV DIST. 3	
			OCT 1 9 2015	
			00119200	
	- 0 B			
# comply with	19.15.25.8.0			
* Combid w.				
	And the second second second	- J.		
Spud Date:	Rig Release I	Date:		
Spud Date.	Rig Release I	Jacc.		
I hereby certify that the information	above is true and complete to the	best of my knowled	ge and belief.	
SIGNATURE Well Ways	TITLE Dro	duction Foreman	DATE 10/15/2015	
SIGNATURE OF THE	IIILE_Pro	duction Foreman	DATE10/15/2015	
Type or print nameJeff Waggor	ner E-mail addres	s: jwaggoner@ctfiel	dsvcs.com PHONE: _505-334-7438	
For State Use Only	al .	27		
APPROVED BY: Accept	ed For Record		DATE	
APPROVED BY: TILE Conditions of Approval (if any):			DATE	