Submit 3 Copies To Appropriate District	State of New			/		H	Form C-10	)3	
Office	Energy, Minerals and I	Natur	ral Resources	/			March 25, 199	99	
District I 1625 N. French Dr., Hobbs, NM 87240	WELL API NO. 31								
District II	OIL CONSERVATION DIVISION				30-045-23641				
811 South First, Artesia, NM 87210 District III	2040 South	5. Indicate Type of Lease							
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, N	STATE 🗌 FEE 🗷							
District IV	,				6. State Oil & Gas Lease No.				
2040 South Pacheco, Santa Fe, NM 87505									
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 Agreement Name:  RUBY CORSCOT A					
1. Type of Well: Oil Well □ Gas Well ▼ Other									
2. Name of Operator					8. Well No.				
XIO Energy Inc.					2				
3. Address of Operator				9. Pool name or Wildcat					
2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401				BASIN FRUITLAND COAL					
4. Well Location	<del>-</del>								
Unit Letter :	2500 feet from the	NOR	TH line and	665 fe	eet from	the WE	<b>ST</b> lin	e	
Section 25	Township 30		Range 12	NMPM		County	san juan		
	10. Elevation (Show whe	ether l	DR, RKB, RT, GR, etc	:.)					
11. Check	Appropriate Box to Indi	cate	Nature of Notice,	Report, or (	Other I	)ata		<u>atal</u>	
** *						ORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WORK	OLGOLITI		ALTERING			
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLI	NG OPNS.		PLUG ANI ABANDON	) IMENIT		
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AND CEMENT JOB			ABANDON	AIVIEIN I		
OTHER:								x	
		<u> </u>	OTHER: PT PROD C			<del> </del>			
<ol><li>Describe Proposed or Complete of starting any proposed work). or recompilation.</li></ol>	• •	-	, .	-		_			
6/14/03: Pressure tested	4-1/2" production cas	ing t	co 1500 psig for 3	0 minutes o	n chart	recorder	. Held		
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			V.	<u> </u>	<u> </u>				
I hereby certify that the information above	e is true and complete to the be	est of n	ny knowledge and belief	1812	<i>`</i> }				
SIGNATURE (Warin X	low	TITL	E REGULATORY SUPE	RVISOR	D	ATE	/31/03	_	
Type or print name DARRIN STEED					elephone		5-324-1090	<u>.                                    </u>	
(This space for State use)		Œ	EPUTY OR & GAS		A	UG - 7	2003	_	
APPROVED BY Conditions of approval, if any:		TITI	<b>PEPUTY OR &amp; GAS INS</b> E	PECTOR, MIST.	DA'	ГЕ		_	
conditions of approval, it ally.									