

Submit 1 Copy To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO.	30-025-34760
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name:	Goodwin 10 State SWD
8. Well Number	1
9. OGRID Number	005380
10. Pool name or Wildcat	SA - Drinkard - ABO

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-104) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other SWD

2. Name of Operator
 XTO Energy, Inc.

3. Address of Operator
 6401 Holiday Hill rd., Bldg 5

4. Well Location
 Unit Letter L : 2160' feet from the South line and 330' feet from the West line
 Section 31 Township 18S Range 37E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING MULTIPLE COMPL
 DOWNHOLE COMMINGLE
 CLOSED-LOOP SYSTEM
 OTHER:

REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. P AND A
 CASING/CEMENT JOB
 OTHER: MIT / Bradenhead

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 19.15.7.14 NMAC.. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

7/10/2018: XTO Energy ran a good MIT & Bradenhead. Good chart and form attached.

Spud Date: Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Regulatory Analyst DATE 7/10/2018

Type or print name Lindsay Deaver E-mail address: lindsay_deaver@xtoenergy.com PHONE 432-221-7307

For State Use Only

APPROVED BY [Signature] TITLE Compliance Officer Supervisor DATE 7/17/18
 Conditions of Approval (if any):

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

RECEIVED
 JUL 16 2018

BRADENHEAD TEST REPORT

Operator Name <i>XTO</i>	API Number <i>30-025-34760</i>
Property Name <i>Goodwin 10 51MC SWD</i>	Well No. <i>1</i>

Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>L</i>	<i>31</i>	<i>1RS</i>	<i>37E</i>	<i>2160</i>	<i>S</i>	<i>330</i>	<i>W</i>	<i>LCA</i>

Well Status

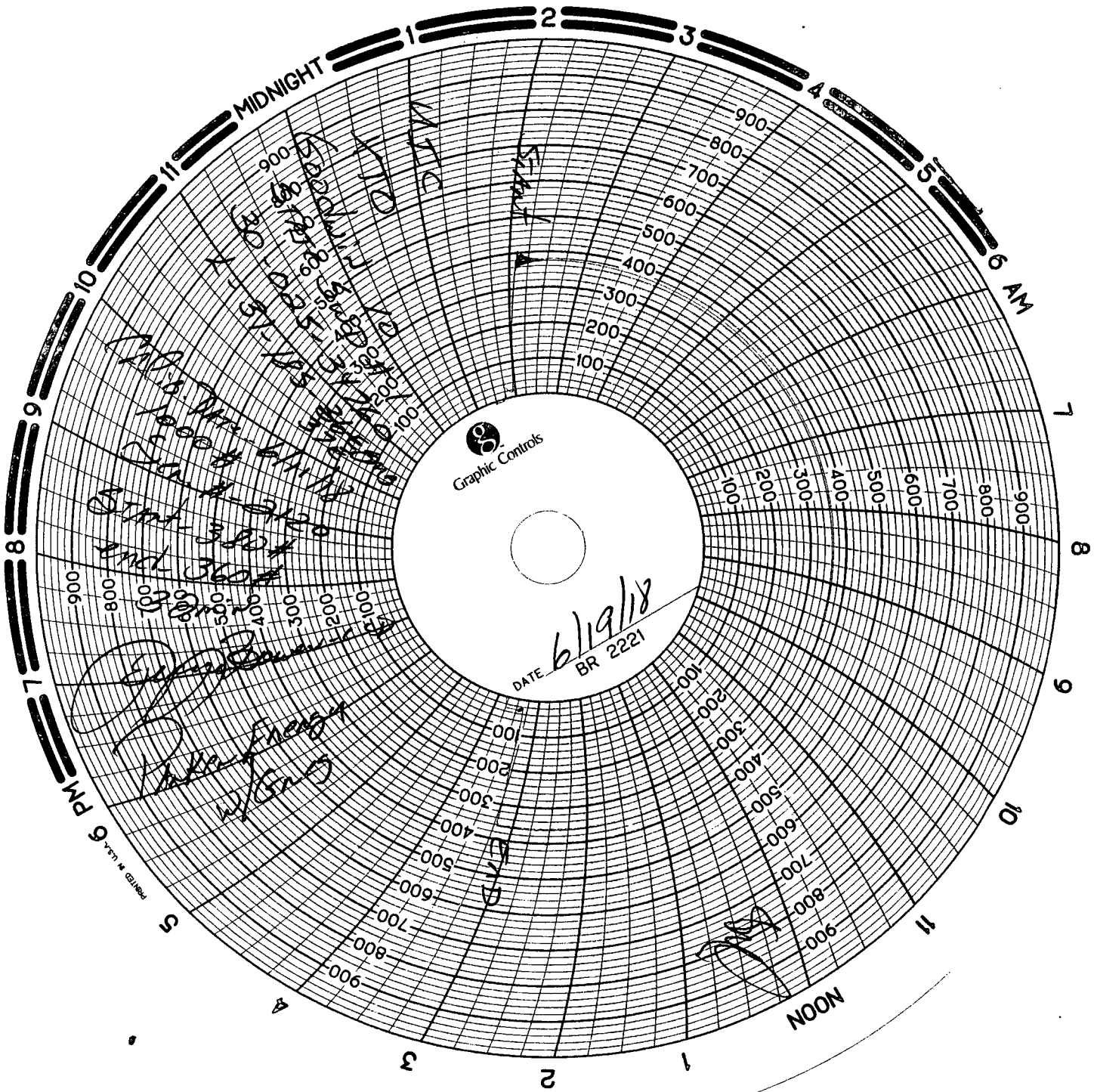
TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INJ <input type="checkbox"/> SWD <input checked="" type="checkbox"/>	OIL <input type="checkbox"/> GAS <input type="checkbox"/>	<i>6/19/18</i>

OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	\emptyset	—	—	\emptyset	<i>-5</i>
Flow Characteristics					<i>VAC</i>
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 _____
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR _____
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS _____
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	If applicable type
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	fluid injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Waterflood

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Luis Cobble XTO</i>	Entered into RBDMS
Title:	Re-test
E-mail Address:	<i>[Signature]</i>
Date: <i>6/19/18</i>	Phone:
Witness: <i>[Signature]</i>	



Graphic Controls

DATE 6/19/18
BR 2221

Handwritten notes in the upper left quadrant, including '1000 Hz', '500 Hz', '250 Hz', and '125 Hz'.

Handwritten notes in the lower left quadrant, including '1000 Hz', '500 Hz', '250 Hz', and '125 Hz'.

Handwritten note '1000 Hz' near the 11 AM mark.

Handwritten signature or initials near the 11 AM mark.

Small text '1770 1/2 1/2 1/2' near the 6 PM mark.