

Submit 3 Copies 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

REC'D/MIDLAND

Form C-103  
May 27, 2004

RECEIVED  
JAN 22 2010  
HOBSOCD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-06923
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: H.T. MATTERN NCT B
8. Well Number 12
9. OGRID Number 005380
10. Pool name or Wildcat Eumont; Yates-7 Rvrs-Queen (Gas)

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.)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/>	7. Lease Name or Unit Agreement Name: H.T. MATTERN NCT B
2. Name of Operator XTO ENERGY, INC.	8. Well Number 12
3. Address of Operator 200 N. Loraine, Ste 800, Midland, TX 79701 ATTN: Kristy Ward	9. OGRID Number 005380
4. Well Location Unit Letter <u>E</u> : <u>1980'</u> feet from the <u>NORTH</u> line and <u>660'</u> feet from the <u>WEST</u> line Section <u>31</u> Township <u>21 S</u> Range <u>37 E</u> NMPM County <u>LEA, NM</u>	10. Pool name or Wildcat Eumont; Yates-7 Rvrs-Queen (Gas)
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☒  
CASING TEST AND CEMENT JOB ☐  
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.

1-11-10 Notified N.M.O.C.D., Mark Whitaker. 1-12-10 Notified BES & N.M.O.C.D., Mark Whitaker.

1-13-10 Set C.I.B.P. @2,600'.

1-14-10 Circulate 9.5# M.L.F. Spot 45 sx. cmt. 2,600'-2,167'. Spot 50 sx.- 1,400'-919'.

1-15-10 Circulate 80 sx. cmt. 520'- surface up 5 1/2" csg. Close 5 1/2" csg. valve & circulate cmt. to surface thru perfs. @30' out 5 1/2" X 8 5/8" csg. Remove wellhead & anchors. Install marker.

Approved for plugging of well bore only.  
Liability under bond is retained pending receipt  
of C-103 (Subsequent Report of Well Plugging)  
which may be found at OCD Web Page under

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 NMOC guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Gary Eggleston TITLE P & A SUPERV. DATE 1-19-10

Type or print name GARY EGGLESTON

E-mail address:

Telephone No. (432) 530-0907

For State Use Only

APPROVED BY Cathy W. Hill TITLE DISTRICT 1 SUPERVISOR DATE JAN 25 2010

Conditions of Approval, if any: