

Submit 1 Copy To Appropriate District Office  
District I – (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II – (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III – (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV – (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

EMNRD-OCD ARTESIA  
REC'D: 4/27/2020

Form C-103  
Revised July 18, 2013

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

WELL API NO. 30-015-44391
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 REMUDA SOUTH 25 STATE 36
8. Well Number 166H
9. OGRID Number 005380
10. Pool name or Wildcat Purple Sage; Wolfcamp
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3061' GL

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	
2. Name of Operator XTO ENERGY, INC.	
3. Address of Operator 6401 HOLIDAY HILL RD, BLDG 5, MIDLAND TX 79707	
4. Well Location Unit Letter <u>G</u> : <u>2280</u> feet from the <u>NORTH</u> line and <u>1995</u> feet from the <u>EAST</u> line Section <u>25</u> Township <u>23S</u> Range <u>29E</u> NMPM County <u>EDDY</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3061' GL	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: COMPLETIONS SUNDRY <input checked="" type="checkbox"/>	

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  
XTO Energy Inc. respectfully submits the completion operations of the referenced well.

08/16/19 PBTD = 19152

12/20/19 Run RCB/GR/CCL

01/09/20 Pressure test 5.5 in. csg to 7350, 30 mins (good test). Open sleeve

01/13/20 TO 03/25/20 Conduct perf and stimulations operations from 11,814 to 19,017 ft, 49 stages, 2072 shots, using 346,005 bbls fluid and 16,283,124 lbs proppant

04/05/20 Set packer @ 10,896 ft., Tubing set @ 10,914.

04/09/20 Burst Disc

Waiting on flowback.

Spud Date: 06/13/19

Rig Release Date: 08/16/19

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

SIGNATURE Cheryl Rowell TITLE Regulatory Coordinator DATE 4/27/20

Type or print name Cheryl Rowell E-mail address: cheryl\_rowell@xtoenergy.com PHONE: 432-518-5734

**For State Use Only**

APPROVED BY: DENIED DATE gc 4/27/20  
Conditions of Approval (if any):