

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
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

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

Form C-103  
May 27, 2004

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. <b>30-045-25543</b>
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator <b>XTO Energy Inc.</b>		6. State Oil & Gas Lease No.
3. Address of Operator <b>2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401</b>		7. Lease Name or Unit Agreement Name: <b>FEE</b>
4. Well Location Unit Letter <b>L</b> : <b>1850</b> feet from the <b>SOUTH</b> line and <b>955</b> feet from the <b>WEST</b> line Section <b>04</b> Township <b>30N</b> Range <b>11W</b> NMPM County <b>SAN JUAN</b>		8. Well Number <b>#4A</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number <b>167067</b>
Pit or Below-grade Tank Application <input checked="" type="checkbox"/> or Closure <input type="checkbox"/> Pit type <b>WKO</b> Depth to Groundwater <b>&gt;100'</b> Distance from nearest fresh water well <b>&gt;1000'</b> Distance from nearest surface water <b>&gt;1000'</b> Pit Liner Thickness: <b>12</b> mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		10. Pool name or Wildcat <b>BLANCO MESAVERDE</b>

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <b>CHEMICAL TREATMENT</b> <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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

XTO performed a chemical treatment by ppg 100 gals 15% HCl acid down tbg & flushed w/1/2 bbl 2% KCl wtr.  
Ppd 200 gals 15% HCl acid down csg & flushed w/1 bbl KCl wtr. RDMO pmp truck. RWTP @ 3:00 p.m.,  
3/14/05.

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

SIGNATURE Holly C. Perkins TITLE REGULATORY COMPLIANCE TECH DATE 3/24/05

Type or print name **HOLLY C. PERKINS**

E-mail address:

Regulatory@xtoenergy.com

Telephone No. **505-324-1090**

For State Use Only

APPROVED BY Chah

TITLE

Asst. Supv.  
SUPERVISOR DISTRICT # **3**

DATE

**MAR 25 2005**

Conditions of Approval, if any: