Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources June 19, 2008 District I WELL API NO. 1625 N French Dr., Hobbs, NM 87240 30-045-35245 District II OIL CONSERVATION DIVISION 1301 W Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE \square FEE X 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 1220 S St Francis Dr , Santa Fe, NM N/A 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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: 8. Well Number Oil Well Gas Well X Other 9. OGRID Number 2. Name of Operator XIO ENERGY INC. 10. Pool name or Wildcat 3. Address of Operator Fruitland Coal 382 CR 3100, AZTEC NM 87410 4. Well Location 190 2041 Unit Letter feet from the South line and feet from the Township NMPM NMPM County Section 29 30N Range 12W San Juan 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5485' Ground Level 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 REMEDIAL WORK ALTERING CASING **CHANGE PLANS** COMMENCE DRILLING OPNS P AND A **TEMPORARILY ABANDON** MULTIPLE COMPL CASING/CEMENT JOB PULL OR ALTER CASING DOWNHOLE COMMINGLE OTHER: APD Extension \mathbf{x} 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. XTO Energy Inc. requests an extension of the APD for one (1) year. RCVD FEB 17'12 OIL CONS. DIV. DIST. 3 APD EXT EXPLOS 2-23-2013 Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowledge and belief. C DATE TITLE Sr. Permitting Tech. **SIGNATURE** cherylene charley@xtoenergy.com PHONE <u>333-3190</u> Type or print name Cherylene E-mail address:

A/

TITLE

SUPERVISOR DISTRICT # 3

DATE 2-23-1

For State Use Only

Conditions of Approval (if any):

APPROVED BY