Submit 3 Copies To Appropriate District Office	State of New Me Energy, Minerals and Natu				19, 2008
District I 1625 N French Dr., Hobbs, NM 87240		WELL API NO.			
District II 1301 W Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-045-34936 5. Indicate Type of Lease		
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE FEE EX		
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	2		6. State Oil & O	Gas Lease No.	
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)			7. Lease Name or Unit Agreement Name: TAFT GAS COM		
1. Type of Well: Oil Well Gas Well X Other			8. Well Number		
2. Name of Operator			9. OGRID Num		
XTO Energy Inc.			5380		
3. Address of Operator 382 CR 3100 AZTEC, NM 87410			10. Pool name or Wildcat BASIN DAKOTA		
4. Well Location	7 121 07110				
Unit Letter	1935 feet from the NO	RTH line and	<b>1855</b> feet	from the WEST	line
Section 14	Township 30N	Range 13W	NMPM NM	PM County SAM	NAUL 1
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5774'					
12 Check Δ	appropriate Box to Indicate		Report or Oth	er Data	
12. Check 1	ppropriate box to marcate	rvature or rvotice,	report, or our	Ci Data	
NOTICE OF INTENTION TO: SUE			SEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		☐ ALTERING CASING ☐			
TEMPORARILY ABANDON		ING OPNS.	P AND A		
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT J	IOB		-
DOWNHOLE COMMINGLE	,				
			-		
OTHER: EXTEND APD	X	OTHER:			
13. Describe proposed or complete of starting any proposed work). or recompletion.	ed operations. (Clearly state all persons of the control of the co				
XTO Energy Inc., requests	an extension on the exist	ing APD.			<i>-</i>
				RCVD MAR 14'1 OIL CONS. DIV DIST. 3	
finalexte	Ext. les 4-24-20	0/3	regulat	t NMOCD rul	met at
Spud Date:	Rig Rele	ase Date:	ti	ime of drilling	=
I hereby certify that the information	above is true and complete to the	e best of my knowledg	ge and belief.		
			TING TECH.	DATE 3 . 13	· 15
Type or print name MALIA VILLERS	E-n	malia_villers@x nail address:		PHONE <u><b>505-3</b>3</u>	33-3698
For State Use Only	4	SHPEDVICAD D	きゃ すいはてりに	2 (0 )	
APPROVED BY Warry	TI	TLE SUPERVISOR D	C A LUMIUN	DATE 3-19-1	<u> </u>
Conditions of Approval (if any):	V	4/			

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