| ۵,   |  |                            |  |            |  |  |
|--|--|----------------------------|--|------------|--|--|
| Submit 3 Copies To Appropriate District State of   | 3 Copies To Appropriate District State of New Mexico |                            |  | Form C-103 |  |  |
| Office Energy, Minerals a District I   | nd Natural Reso                                      |                            |  | 7, 2004    |  |  |
| 1625 N. French Dr., Hobbs, NM 87240<br>District III<br>District III OIL CONSERV  |  | VELL A                     | 30-045-32642   |            |  |  |
|  | St. Francis D  |                            | ate Type of Lease  |            |  |  |
| 1000 Rio Brazos Rd., Aztec, NM 87410 Santa F<br>District IV  | e, NM 87505  |                            | TATE FEE 🗴   |            |  |  |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505  | ACT 22 22 20   | 6. State                   | Oil & Gas Lease No.  |            |  |  |
| SUNDRY NOTICES AND REPORTS<br>(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO<br>DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FO<br>PROPOSALS.) | DÈEPEN OR PLUG                                       |                            | Name or Unit Agreement N<br>Gas Com                                    | ame:       |  |  |
| 1. Type of Well:<br>Oil Well Gas Well 🕱 Other  | DIN.   | 8. Well                    | Number<br>#2   |            |  |  |
| 2. Name of Operator O<br>XTO Energy Inc.   | DIST.  | 9. OGRI                    | D Number<br>167067   |            |  |  |
| 3. Address of Operator   | DOLOGNY  | 10. Poo                    | l name or Wildcat  |            |  |  |
| 2700 Farmington Ave., Bldg. K. Ste 1 Farmin<br>4. Well Location  | 8740   | 1Basin H                   | Truitland Coal   |            |  |  |
|  |  |                            |  |            |  |  |
| Unit Letter <u>I</u> : <u>1810</u> feet from the   | south  | line and 470               | feet from the east   | line       |  |  |
| Section 26 Township  | 29N Range  | 10W NMPM                   | NMPM County San  | Juan       |  |  |
| 11. Elevation (Show 5557)  | whether DR, RK                                       |                            |  |            |  |  |
| Pit or Below-grade Tank Application or Closure   |  |                            |  |            |  |  |
| Pit type Depth to Groundwater Distance from n  |  |                            |  |            |  |  |
| Pit Liner Thickness: mil Below-Grade Tank  | : Volumeb  | bls; Construction Material |  |            |  |  |
| 12. Check Appropriate Box to<br>NOTICE OF INTENTION TO:<br>PERFORM REMEDIAL WORK D PLUG AND ABANDO   | _  | · • •                      | or Other Data  |            |  |  |
| TEMPORARILY ABANDON  |  | ENCE DRILLING OPNS         |  |            |  |  |
| PULL OR ALTER CASING MULTIPLE<br>COMPLETION  |  | G TEST AND<br>NT JOB       |  | IT C       |  |  |
| OTHER:   |  | R: PT PROD CSG             |  | X          |  |  |
| 13. Describe proposed or completed operations. (Clearly st   |  |                            | dates including estimated d  |            |  |  |
| of starting any proposed work). SEE RULE 1103. Fo.<br>or recompletion.   |  |                            |  |            |  |  |
| XTO Energy Inc. pressure tested 5-1/2" produ<br>OK.  | ction casing o                                       | on 5/5/05 to 1500 pa       | ig for 30 mintues. Tes   | sted       |  |  |
|  |  |                            |  |            |  |  |
|  |  |                            |  |            |  |  |
|  |  |                            |  |            |  |  |
| /  |  |                            |  |            |  |  |
| I hereby certify that/the information above is true and comple<br>grade tank has been/will be constructed or closed according to NMOCI                   | te to the best of                                    | my knowledge and belie     | f. I further certify that any pit of<br>tashed) alternative OCD approv | below-     |  |  |
| SIGNATURE DULY C. Turns  |  | BGULATORY COMPLIANCI       |  |            |  |  |
| 0  | E-mail add   |                            |  |            |  |  |
| Type or print name HOLLY C. PERKINS  |  | al & Gas Inspector, D      | Telephone No. 505-32   | 4-1090     |  |  |
| For State Use Only 1   | reania (   | me & vaj hter leton, j     |  |            |  |  |
| APPROVED BY #. Villanueve  | TITLE  |                            | JUN 202  | <u>UU5</u> |  |  |

APPROVED BY **F**. **V** Conditions of Approval, if any: