

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

Form C-103
May 27, 2004

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

WELL API NO. 30-045-24699
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: AZTEC
8. Well Number #9
9. OGRID Number 167067
10. Pool name or Wildcat MV / PC / FS

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-104) 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 2700 Farmington Ave., Bldg. K, Ste 1 Farmington, NM 87401	4. Well Location Unit Letter M : 1095 feet from the SOUTH line and 1140 feet from the WEST line Section 09 Township 30N Range 11W NMPM County SAN JUAN
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application <input checked="" type="checkbox"/> or Closure <input type="checkbox"/> Pit type WKO Depth to Groundwater >100' Distance from nearest fresh water well >1000' Distance from nearest surface water >1000' Pit Liner Thickness: WKO mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: **REPAIR FAILED PACKER** ☒

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 repaired packer (per RBOMS-CTP0511760244) by: MIRU rig. HD well. Ppd dwn tbq w/80 bbls 2% KCl wtr & KW. ND WH. NU BOP. Wrkd tbq uphole 10' to free pkr; wrkd tbq w/32K to rls pkr @ 2089' w/o success. RU WL. RIH w/chem cutter & cut tbq @ 1765'. Tgd TOF @ 1765'. Killed well. Mandrel parted inside pkr @ 1st snap ring. Used 2% KCl wtr to estb circ. Wrkd fish free. Cut jut tbq; cntr pkg elements rolled & damaged. Wrkd fish free; ppd dwn csq to KW. Found 1st 2 jts above F-nip plugged. Ppd dwn csq w/2% KCl wtr. Stung into pkr. MIRU SLU. Tgd @ 4050' SLM. MIRU AFU & estb circ; cln out fr/4399'-4547'. RDMO AFU. Ppd dwn csq w/wtr to KW. PT tbq to 500 psig; tstd OK. MIRU SLU. Swb well w.347 BLW, 300 runs, 121 hrs. RWTP @ 12:30 p.m. 8/20/05.

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 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 8/31/2005
Type or print name **HOLLY C. PERKINS** E-mail address: **Regulatory@xtoenergy.com** Telephone No. **505-324-1090**

For State Use Only

APPROVED BY Chad R TITLE SUPERVISOR DISTRICT # 3 DATE SEP 02 2005
Conditions of Approval, if any: