| Submit 3 Copies To Appropriate District                                                                                                                                    | State of New Me                                                                                                                                                                                                               |                                                                                                                           |                                                                                                                                              | Form C-103                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| Office District I                                                                                                                                                          | Energy, Minerals and Natur                                                                                                                                                                                                    | ral Resources                                                                                                             |                                                                                                                                              | May 27, 2004                                                   |
| 1625 N. French Dr., Hobbs, NM 87240                                                                                                                                        |                                                                                                                                                                                                                               |                                                                                                                           | WELL API NO.                                                                                                                                 |                                                                |
| District II<br>1301 W. Grand Ave., Artesia, NM 88210                                                                                                                       | OIL CONSERVATION                                                                                                                                                                                                              | NOISIVION                                                                                                                 | 30-045-33017                                                                                                                                 |                                                                |
| District III                                                                                                                                                               | 1220 South St. Fra                                                                                                                                                                                                            |                                                                                                                           | 5. Indicate Type of Lease                                                                                                                    | I                                                              |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV                                                                                                                        | Santa Fe, NM 8'                                                                                                                                                                                                               | 7505                                                                                                                      | STATE X F                                                                                                                                    | EE 🗆                                                           |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505                                                                                                                                | 5                                                                                                                                                                                                                             |                                                                                                                           | 6. State Oil & Gas Lease I                                                                                                                   | NO.                                                            |
|                                                                                                                                                                            | CES AND REPORTS ON WEL                                                                                                                                                                                                        |                                                                                                                           | 7. Lease Name or Unit Ag                                                                                                                     | reement Name                                                   |
| (DO NOT USE THIS FORM FOR PROPO<br>DIFFERENT RESERVOIR. USE "APPLIC<br>PROPOSALS.)                                                                                         | OSALS TO DRILL OR TO DEEPEN C<br>CATION FOR PERMIT" (FORM C-10                                                                                                                                                                | OR PLUG BACK TO A<br>1) FOR SUCH                                                                                          | STATE J COM                                                                                                                                  | A 13.00 2/3                                                    |
| 1. Type of Well: Oil Well Gas Well                                                                                                                                         | Other                                                                                                                                                                                                                         |                                                                                                                           | 8. Well Number                                                                                                                               | SEP 2008                                                       |
| 2. Name of Operator                                                                                                                                                        |                                                                                                                                                                                                                               |                                                                                                                           | 9. OGRID Number                                                                                                                              | ON COMS. DIV                                                   |
| XTO Energy Inc.                                                                                                                                                            |                                                                                                                                                                                                                               |                                                                                                                           | #2S                                                                                                                                          | <del></del>                                                    |
| 3. Address of Operator                                                                                                                                                     |                                                                                                                                                                                                                               |                                                                                                                           | 10. Pool name or Wildcak                                                                                                                     | Es                                                             |
| 2700 Farmington Ave., Bld<br>4. Well Location                                                                                                                              | g. K. Ste 1 Farmington, N                                                                                                                                                                                                     | 4 87401                                                                                                                   | BASIN FRUITLAND COAL                                                                                                                         | CO.11.01.6.8                                                   |
| Unit Letter D :                                                                                                                                                            | 715 feet from the NOR                                                                                                                                                                                                         | line and                                                                                                                  | 785 feet from the                                                                                                                            | <b>WEST</b> line                                               |
| Section D                                                                                                                                                                  |                                                                                                                                                                                                                               | Range 26N                                                                                                                 | NMPM 11W Cour                                                                                                                                | ity <b>San Juan</b>                                            |
|                                                                                                                                                                            | 11. Elevation (Show whether 625                                                                                                                                                                                               | DR, RKB, RT, GR, et<br>57' GR                                                                                             | c.)                                                                                                                                          |                                                                |
| Pit or Below-grade Tank Application                                                                                                                                        |                                                                                                                                                                                                                               |                                                                                                                           |                                                                                                                                              |                                                                |
| Pit type Depth to Groundwater                                                                                                                                              |                                                                                                                                                                                                                               |                                                                                                                           |                                                                                                                                              | 1                                                              |
| Pit Liner Thickness: mil                                                                                                                                                   | Below-Grade Tank: Volume.                                                                                                                                                                                                     | bbls; Constructi                                                                                                          | on Material                                                                                                                                  |                                                                |
| EMPORARILY ABANDON                                                                                                                                                         | CHANGE PLANS                                                                                                                                                                                                                  | COMMENCE DRILL                                                                                                            | ABAI                                                                                                                                         | G AND NOONMENT                                                 |
| OTHER: CHIG CASIONG & CMT                                                                                                                                                  | COMPLETION                                                                                                                                                                                                                    | CEMENT JOB<br>OTHER:                                                                                                      |                                                                                                                                              |                                                                |
|                                                                                                                                                                            |                                                                                                                                                                                                                               | <u> </u>                                                                                                                  |                                                                                                                                              | · · · · · · ·                                                  |
| <ol> <li>Describe proposed or complete<br/>of starting any proposed work)<br/>or recompletion.</li> </ol>                                                                  | d operations. (Clearly state all per                                                                                                                                                                                          |                                                                                                                           |                                                                                                                                              |                                                                |
| STC csg @ +/- 200' cmtd w<br>ppg, 1.39 cuft/sx, 6.67 g<br>annular vol required to c<br>200* sx Type III cmt with<br>wtr/sx) w/approx 100 sx T<br>cuft/sx, 6.72 gals wtr/sx | to chg the csg & cmt on the vapprox 150 sx Type III cm gals wtr/sx). Ttl est slurry sirc cmt to surf. Prod Csg: a 8% gel, 1/4 pps Celloflak Cype III cmt w/1% CaCl2, 1/4). Ttl est slurry vol is 6 surf. A ctual cmt vol will | t (or equiv) with<br>y vol is 104.25 cm<br>5-1/2", J-55, 15<br>e & 2% Phenoseal<br>4 pps Celloflake &<br>49 cuft, +/- 40% | 1/4 pps celloflake, 2% ift, 250% excess of cal .5# STC csg @ +/- 1750' (11.9 ppg, 2.54 cuft/sx 2% Phenoseal (14.5 ppexcess of calculated and | CaCl2 (14.6 culated cuttd w/approx , 15 gals g, 1.41 mular vol |
| hereby certify that the information a                                                                                                                                      | shove is true and complete to the closed according to NMOCD guideline                                                                                                                                                         | s, a general permit                                                                                                       | or an (attached) alternative C                                                                                                               | CD-approved plan                                               |
| SIGNATURE VILLE                                                                                                                                                            | 111                                                                                                                                                                                                                           |                                                                                                                           | OMPLIANCE TECH DATE                                                                                                                          |                                                                |
| Гуре or print name <b>HOLLY C. PER</b>                                                                                                                                     | CINS                                                                                                                                                                                                                          |                                                                                                                           | •                                                                                                                                            | n<br>o. <b>505-324-1090</b>                                    |
| For State Use Only                                                                                                                                                         | 1/1                                                                                                                                                                                                                           | DEPUTY OIL & GAS IN                                                                                                       | ispector, dast. 🐠                                                                                                                            | SEP 27 200                                                     |
| APPROVED BY                                                                                                                                                                | TIT                                                                                                                                                                                                                           | TLE                                                                                                                       | DATE _                                                                                                                                       |                                                                |
| Conditions of Approval, if any:                                                                                                                                            | N V                                                                                                                                                                                                                           |                                                                                                                           |                                                                                                                                              |                                                                |