

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. 30-045-33141
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & 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)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	7. Lease Name or Unit Agreement Name: STATE GAS COM BA
2. Name of Operator XTO Energy Inc.	8. Well Number 1G
3. Address of Operator 2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401	9. OGRID Number 5380
4. Well Location Unit Letter B ; 665 feet from the NORTH line and 2620 feet from the EAST line Section 16 Township 31N Range 12W NMPM County SAN JUAN	10. Pool name or Wildcat BASIN DAKOTA/BLANCO MESAVERDE
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6170'	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ 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: **CHEMICAL TREATMENT** ☒

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. performed a chemical treatment on this well as follows:

MIRU pump truck on 7/16/07. Mixed 500 gals of 15% HCl acid w/10 gals C-864 (corr inhib), 5 gals CB-1089 (iron control), 5 gals O-33 (micellular solvent) & 10 gals F-750 (foamer). Pumped 500 gals down tubing & flushed w/3 bbls of 2% KCl water. RDMO pump truck. SWI for 4 hours. Dropped new BHBS & same single pad plunger. RWTP on 7/16/07.

RCVD AUG2'07
OIL CONS. DIV.
DIST. 3

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/will be constructed or closed according to NMOCDC guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE *Lorri D. Bingham* TITLE REGULATORY COMPLIANCE TECH DATE 7/31/07

Type or print name **LORRI D. BINGHAM**

E-mail address: **Regulatory@xtoenergy.com**

Telephone No. 505-324-1090

For State Use Only

Deputy Oil & Gas Inspector,
District #3

APPROVED BY *H. Villanueva* TITLE _____ DATE AUG 02 2007

Conditions of Approval, if any: