Submit 3 Copies To Appropriate District Office	State of New Me			Form C-103
District 1 1625 N French Dr, Hobbs, NM 87240	Energy, Minerals and Natural Resources		June 19, 2008 WELL API NO.	
District.II	OIL CONSERVATION DIVISION		30-045-34738	
1301 W. Grand Ave, Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease	
1000 Rio Brazos Rd , Aztec, NM 87410 District IV	M 87410 Santa Fe, NM 87505		STATE _	FEE x
1220 S. St. Francis Dr., Santa Fe, NM 87505		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)			7. Lease Name or Unit Agreement Name: MORRIS GAS COM C	
1. Type of Well: Oil Well Gas Well X Other			8. Well Number #1Y	
2. Name of Operator			9. OGRID Number	
XTO ENERGY INC.			5380	
3. Address of Operator			10. Pool name or Wildcat	
382 CR 3100 AZTEC, 4. Well Location	NM 87410		DK / MV / GP /	CH
Unit Letter N:_	850 feet from the SOT	JIH line and		m the WEST line
Section 26	Township 29-N	Range 10-W	NMPM NMPM	County SAN JUAN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5546				
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO: SUB			SSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON			ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	<u></u>	P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT J	ОВ 📙	
DOWNHOLE COMMINGLE				
OTHER:		OTHER: PT PROD (CSG	X
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. pressure tested 5-1/2" casing on 10/05/2008 to 2,500 psig f/30 min w/chart. Increased pressure to 3,850 psig f/5 min. Tested OK.				
pressure to 3,850 psig i/	o min. Tested Ok.		E	CVD OCT 14 '08
			_	
				OIL CONS. DIV.
				DIST. 3
Spud Date:	Rig Relea	ase Date:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Dalona Claim	TIT			DATE <u>10/09/2008</u>
Type or print name DOLENA JOHNSON E-mail address: PHONE 505-333-3100				
For State Use Only Deputy Oil & Gas Inspector, District #3 Deputy Oil & Gas Inspector, District #3				
APPROVED BY Conditions of Approval (if any)	2//	rle	Γ	DATE
Conditions of Approval (if any):				