Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources				Form C-103
District I	WELL API NO. f	June 19, 2008		
1625 N. French Dr., Hobbs, NM 87240 DISTRICT II OIL CONSERVATION DIVISION			30-045-34489	
1301 W. Grand Ave, Artesia, NM 88210 District III 1220 South St. Francis Dr.			5. Indicate Type of I	
1000 Rio Brazos Rd, Aztec, NM 87410 Santa Fe, NM 87505 District IV			STATE 🔯	FEE x
1220 S. St Francis Dr , Santa Fe, NM 87505			6. State Oil & Gas\L	ease No.
SUNDRY NOTICES AN	7. Lease Name or Ui	nit Agreement Name:		
(DO NOT USE THIS FORM FOR PROPOSALS T DIFFERENT RESERVOIR. USE "APPLICATION PROPOSALS.)	MCKENZIE A			
1. Type of Well: Oil Well Gas Well X Other			8. Well Number #1E	
2. Name of Operator			9. OGRID Number	
XTO ENERGY INC.	5380			
3. Address of Operator			10. Pool name or Wildcat	
382 CR 3100 AZTEC, NM 87410 4. Well Location	BASIN DAKOTA			
Unit Letter <u> </u>	feet from the SO	лн line and	1625' feet from	the EAST line
Section 9	Township 30N	Range 12W	NMPM	County SAN JUAN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5712' GR				
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION	ON TO:	SUBS	SEQUENT REPO	ORT OF:
PERFORM REMEDIAL WORK PLUC	G AND ABANDON 🔲	REMEDIAL WORK		ALTERING CASING
TEMPORARILY ABANDON	NGE PLANS	COMMENCE DRILLIN	NG OPNS. 🔲	P AND A
PULL OR ALTER CASING			ов 🗆	
DOWNHOLE COMMINGLE				
OTHER:		OTHER: LANDED TU	BING	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. previously requests exception to Rule 19.15.3.107 (J2) requiring all wells equipped with casing larger in size than $3-1/2$ " OD be tubed.				
RCVD OCT 27'08				
XTO landed 2-3/8", 4.7#, J-55 tubing in this well @ 6555' on 10/22/2008. OIL CONS. DIV. DIST. 3				
		<u></u>		-
Spud Date:	Rig Relea	ase Date:		
I hereby certify that the information above is	s true and complete to the	e best of my knowledge	and belief.	
SIGNATURE TITLE REGULATORY CLERK DATE 10/24/2008 dee johnson@xtoenergy.com				
Type or print name DOLENA JOHNSON E-mail address: PHONE 505-333-31.00				
For State Use Only		, a / Ji. de (as Inspector,	NOV 1 5 sood
APPROVED BY Tal. G. R.J.G.	TI	rle <u>Distri</u>	ct #3 DA	NOV 1 2 2008
Conditions of Approval (if any):		1		