Submit 3 Copies To Appropriate District	State of New Me		Form C-103		
District 1	Energy, Minerals and Natural Resources		June 19, 2008 WELL API NO.		
1625 N French Dr , Hobbs, NM 87240 District II	OIL CONSERVATION DIVISION		30-045-22954		
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	Santa Fe, NM 87505		STATE [	FEE 🗴	
District IV 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: MARTINEZ GAS COM I		
1. Type of Well: Oil Well Gas Well X Other			8. Well Number #1		
2. Name of Operator			9. OGRID Number		
XTO Energy Inc. 3. Address of Operator			5380		
382 CR 3100 AZTEC, NM 87410			BLANCO MESAVERDE		
4. Well Location					
Unit Letter K :	1570' feet from the SOU	UTH line and	1780' feet fro	m the WEST line	
_Section 24	Township 29-N	Range 10-W	NMPM NMPM	County SAN JUAN	
	11. Elevation (Show whether	DR, RKB, RT, GR, et	c.)		
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK			ALTERING CASING 🗌	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	ING OPNS. 🔲	P AND A	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT J	ов 🗆		
DOWNHOLE COMMINGLE					
	-				
OTHER:		OTHER: RECOMPLE	TE TO OTERO CHACE	X AS	
13. Describe proposed or complete of starting any proposed work) or recompletion.	ed operations. (Clearly state all per SEE RULE 1103. For Multiple				
XTO Energy Inc. recomplet	ted the Otero Chacra pool o	of this well per th	ne attached morni	ng report.	
s saems is said to the said to	* note helow	U -		RCVD OCT 23 'C8 OIL CONS. DIV.	
	ere Ge			DIST. 3	
order to the control of the control	<u></u>				
Spud Date:	Rig Relea	ase Date:	LO/21/2008		
I hereby certify that the information	above is true and complete to the	e best of my knowledg	e and belief.		
SIGNATURE Dolora Cla	himse > TIT	LE <u>REGULAT</u>	ORY CLERK	DATE 10/22/2008	
Type or print name <b>DOLENA JOHNS</b>	ON F-11	dee_johnson@xto		PHONE <u>505-333-3100</u>	
1	j		& Gas Inspect		
For State Use Only		Nie	strict #3	DATE OCT 2 7 2008	
APPROVED BY Conditions of Approval (if any):	*	ILE			
Tile copy of CB	CBL listed a GR/CCL was	as run on 10/9/2008 vas run on that date.	was in error. Only	Po	
And colled of co	- /				