Office	State of New Mexico	
District I Energy, M1 1625 N. French Dr., Hobbs, NM 88240	nerals and Natural Resources	June 19, 2008 WELL API NO.
District II	SERVATION DIVISION	30-045-34879
District III 1220	South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	anta Fe, NM 87505	6. State Oil & Gas Lease No. L-4639-4
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		GRACIA STATE 32 0 8. Well Number
1. Type of Well: Oil Well Gas Well Other		#5
2. Name of Operator XTO ENERGY INC.		9. OGRID Number 5380
3. Address of Operator 382 CR 3100, AZTEC NM 87410		10. Pool name or Wildcat FRUITLAND COAL
4. Well Location		
Unit Letter L :1530feet from	om theSOUTH line and	460feet from theWESTline
Section 32 Township 26N Range 11W NMPM NMPM County SAN JUAN		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6250		
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 DRILLING OPNS.☐ P AND A ☐		
PULL OR ALTER CASING		
DOWNHOLE COMMINGLE		
OTHER: APD EXTENSION	☐ OTHER:	
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 would like to request a one year extension	n for the above listed well	
7.10 Energy would like to request a one year extension	That the above listed well.	
		RCVD JAN 5 '11
		OIL CONS. DIV.
		·
	(2)	DIST. 3
APD Exl. Res 1-6-2012		
DDD EXE.XES		
, ,		
Spud Date:	Rig Release Date:	
<u> </u>		11 1' 6
I hereby certify that the information above is true and o	omplete to the best of my knowledg	e and belief.
,		
SIGNATURE Malia Willers TITLE Permitting Team. DATE 1/5/11		
Type or print name Malia Villers E-mail address: malia_villers@xtoenergy.com PHONE: 505/333-3100		
For State Use Only		
APPROVED BY: Munfille	TITLE SUPERVISOR DISTRIC	T#3 DATE \-\\-\\
Conditions of Approval (if any):	<u> </u>	
	11	