Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 30-045-09680 District II OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III STATE FEE X 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 12 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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.) Christman Gas Com 1. Type of Well: Oil Well Gas Well X Other 8. Well No. 2. Name of Operator XTO Energy, Inc. 3. Address of Operator 9. Pool name or Wildcat Basin Dakota / Blanco Mesaverde 2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401 4. Well Location 2,165 feet from the South line and 1,090 feet from the West line Section 11 Township 30N Range **NMPM** County 10. Elevation (Show whether DR, RKB, RT, GR. etc.) 5,915' GL, 5,927' KB 11. 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 **ALTERING CASING** REMEDIAL WORK **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. **PLUG AND ABANDONMENT** CASING TEST AND PULL OR ALTER CASING **MULTIPLE** COMPLETION **CEMENT JOB** OTHER: COMPLETION OF DOWNHOLE COMMUNICLE \mathbf{x} OTHER: 12. 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 recompilation. 3/13/02: Gas production from the Chrisman Gas Com #1 was downhole commingled on September 9, 2002, per Order DHC-621A% issued by the New Mexico Oil Conservation Division on January 9, 2002. I hereby certify that the information above is true and complete to the best of my knowledge and belief. TITLE Operations Engineer 9/10/02 SIGNATURE_ _DATE_ Type or print name Thomas DeLong Telephone No. 505-324-1090 (This space for Standard Standard by STEVEN M. HAVIN ... STRIP TO A SECRETARY SEE SECTION 1 2 2002 APPROVED BY

Conditions of approval, if any: