Submit 1 Copy To Appropriate District Office State of New Mexico	Form C-103
District 1 – (575) 393-6161 Energy, Minerals and Natural Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240	WELL API NO.
District II ~ (575) 748-1283 811 S. First St., Artesia, NM 88210	30-025-22004
71 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5. Indicate Type of Lease STATE ☑ FEE □
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 UN 12 2012 Santa Fe, NM 87505 District IV – (505) 476-3460	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NMOBBSUCD 87505	OG-534
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	7. Lease Name or Unit Agreement Name STATE WE K
PROPOSALS.)  1. Type of Well: Oil Well	8. Well Number 1
2. Name of Operator	9. OGRID Number 020451
XOG OPERATING, LLC 3. Address of Operator	10. Pool name or Wildcat
1801 W. Texas, Midland, TX 79702	Osudo, Morrow, S. & Osudo, Wolfcamp, S
4. Well Location	
Unit Letter F: 1980 feet from the North line and	1980 feet from the West line
	SE NMPM LEA County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3599" GR	
N. Control of the Con	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK	
TEMPORARILY ABANDON ☑ CHANGE PLANS ☐ COMMENCE DRI	LLING OPNS. P AND A
PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT	JOB 🗆
DOWNHOLE COMMINGLE	
OTHER: 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
proposed completion of recompletion.	
Per conversation with E. L. Gonzales this date, XOG wishes to extend the TA status for this well for two years.	
The Oil Conservation Division Condition of Approval: notify	
MUST BE NOTIFIED 24 Hours  OCD Hobbs office 24 hours	
Prior to the heginning of apprecions	
prior of running MIT Test & Chart	
- · · · · · · · · · · · · · · · · · · ·	ning MIT Test & Chart
•	ning MII Test & Chart
•	ning MII Test & Chart
Spud Date: Rig Release Date:	ning MII Test & Chart
Spud Date: Rig Release Date:	ning MIT Test & Chart
Spud Date:  Rig Release Date:  I hereby certify that the information above is true and complete to the best of my knowledge.	
	and belief.
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE TITLE PRODUCTION ANALYSIS PRODUCTION ANALYS	and belief.  LYST DATE 6/11/12
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE TITLE PRODUCTION ANALYSIS PRODUCTION ANALYS	and belief.
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE  TITLE PRODUCTION ANALY  Type or print name ANGIE CRAWFORD E-mail address: acrawford@xogo  For State Use Only	perating.com PHONE: 432-683-3171
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE  TITLE PRODUCTION ANALY  Type or print name ANGIE CRAWFORD E-mail address: acrawford@xogo  For State Use Only	and belief.  LYST DATE 6/11/12