

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources  
 OIL CONSERVATION DIVISION  
 220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

**HOBBS OCD RECEIVED**  
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 AUG 01 2018

WELL API NO. 30-025-24612	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. B-1520	
7. Lease Name or Unit Agreement Name NORTH VAC ABO UNIT	
8. Well Number 219	
9. OGRID Number 298299	
10. Pool name or Wildcat NORTH VAC ABO	
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.) 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJ	
2. Name of Operator CROSS TIMBERS ENERGY, LLC	
3. Address of Operator 400 W 7TH ST, FORT WORTH, TX 76102	
4. Well Location Unit Letter <u>N</u> : <u>1030</u> feet from the <u>S</u> line and <u>1973.3</u> feet from the <u>W</u> line Section <u>13</u> Township <u>17-S</u> Range <u>34-E</u> NMPM County <u>LEA</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 416 GR	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

08/16/2018

- MIRU. POOH w/ 2-3/8", 4.7#, J-55 tbg & seal assembly. Replace tbg as needed. Redress or replace seal assembly, as needed.
- Make a casing scraper run. RIH w/ plug&pk to test casing for integrity.
- RIH w/ tubing and seal assembly and sting into packer @ 8,440'.
- L&T backside. Sting out, circulate w/ packer fluid, sting back in.
- Notify NMOCD and perform MIT.

\*\*\*In the event the seal assembly cannot be redressed or replaced, would skip plug & pkr run & RIH and set Arrowset Injection packer on tubing @ 8,420'.  
 Top Perf @ 8,500'  
 Permanent packer @ 8,440'

**Condition of Approval: notify  
 OCD Hobbs office 24 hours**

Spud Date: 1/17/1974 Rig Release Date: 2/8/1974 prior of running MIT Test & Ch rt

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Samantha Angeles TITLE Regulatory Technician DATE 8/9/2018

Type or print name Samantha Angeles E-mail address: sangeles@mspartners.com PHONE: 817-334-7747

**For State Use Only**

APPROVED BY: Mahey Brown TITLE AO/I DATE 8/13/2018  
 Conditions of Approval (if any):