Submit I Copy To Appropriate District Office	State of New M Energy, Minerals and Nati		Form C-103 Revised July 18, 2013
District I 1625 N. French Dr., Hobbs, NM 88240 BBS OCD ISERVATION DIVISION			WELL API NO.
1301 W Grand Ave. Artesia NM 88210 UIL CONSERVATION DIVISION			30-025-04519 5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87418 P 10 20 South St. Francis Dr. 87505			STATE X FEE
District IV			6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., 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.)			Eunice Monument South Unit
1. Type of Well: Oil Well Gas Well Other Injection			8. Well Number 242
2. Name of Operator XTO Energy, Inc.			9. OGRID Number 005380
3. Address of Operator 6401 Holiday Hill rd., Bldg 5			10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres
4. Well Location			
Unit Letter 1 :	1980' feet from the South	line and	660' feet from the East line
Section 5		0	NMPM County Lea
	11. Elevation (Show whether	DR, RKB, RT, GR, etc	c.)
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
12. Check Appropriate Box to indicate Nature of Notice, Report, of Other Data			
NOTICE OF INTENTION TO: SUB			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLI	NG OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT JO	ОВ 🗌
DOWNHOLE COMMINGLE	J		
CLOSED-LOOP SYSTEM COTHER:]	OTHER: MIT/Brade	land
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.			
XTO Energy respectfully requests the following pursuant to a failed annual MIT:			
1. POOH w/tbg & pkr.			dition of Approval: notify
2. Reset pkr.		00	D Hobbs office 24 hours
3. RiH w/tbg & pkr 4. Run good MiT		prior o	f running MIT Test & Chart
if it is found that casing integrity issues ae the causes of the failure, a follow up C103 will be provided to NMOCD & the district			
office worked with.			
Spud Date:	Rig Relea	ase Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE TITLE Regulatory Analyst DATE 9/10/2018			
Type or print name Lindsay Deaver E-mail address:		PHONE 432-221-7307	
For State Use Only			
APPROVED BY WALLY DOWN TITLE AO/I DATE 9/11/2018			
Conditions of Approval (if any):			

