

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 Rec'd 08/18/2020 - NMOCD
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-46432
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name James Ranch Unit 6 Torino Fee
8. Well Number SWD 001
9. OGRID Number 373075
10. Pool name or Wildcat SWD; Devonian
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3302 GL

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 Gas Well Other

2. Name of Operator
XTO Permian Operating LLC

3. Address of Operator
6401 Holiday Hill Rd. Bldg 5, Midland, TX 79707

4. Well Location
 Unit Letter K : 2211 feet from the South line and 1402 feet from the West line
 Section 06 Township 23S Range 31E NMPM County Eddy, NM

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: MIT <input checked="" type="checkbox"/>
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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 Permian Operating LLC respectfully submits this sundry notice to report operations and results of the Mechanical Integrity Test performed on the referenced well

07/22/20

Perform step rate test. Acidize well w/20000 gal 20% HCl. Perform second step-rate test. RIH w/tandem guages. POOH w/guages and MIRU for MIT

07/23/20

Perform MIT to 510 psi -> 495 psi for 30 min. Well shut in pending commencement of injection operations.

Chart is denied
 All MIT test to be done on 1000 # chart with 1000 # spring
 chart recorded calibration with in 6 months of test.

Spud Date:

Rig Release Date:

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

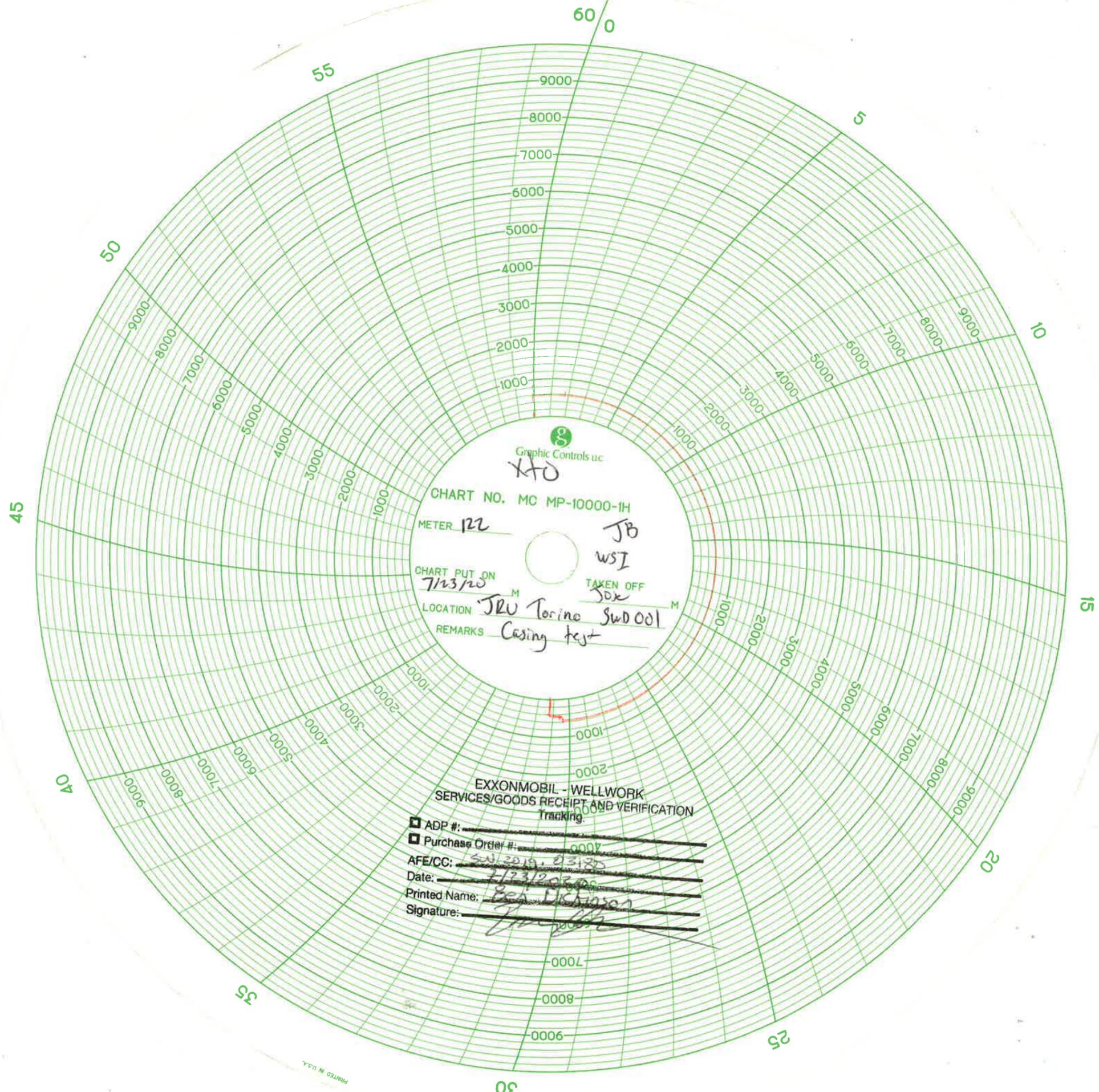
SIGNATURE Tracie J. Cherry TITLE Regulatory Coordinator DATE 08/18/20

Type or print name Tracie J. Cherry E-mail address: tracie_cherry@xtoenergy.com PHONE: 432-221-7379

For State Use Only

APPROVED BY: Dan Dmolek TITLE Compliance Officer DATE 8-25-2020

Conditions of Approval (if any):



Graphic Controls Inc.

KTO

CHART NO. MC MP-10000-1H

METER 122

JB

CHART PUT ON 7/23/20

WSI

TAKEN OFF

LOCATION TRU Torino SWD001

REMARKS Casing test

EXXONMOBIL - WELLWORK SERVICES/GOODS RECEIPT AND VERIFICATION Tracking

ADP #: _____
 Purchase Order #: 6007
 AFE/CC: SW/2019. 03125
 Date: 7/23/2020
 Printed Name: Ben Anderson
 Signature: [Signature]