

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

REC'D NMOCD  
11/05/2020

Form C-103  
Revised July 18, 2013

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

|  |  |   |
|--|--|---|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)            |  | WELL API NO.<br>30-015-46434  |
| 1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>  |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br>XTO ENERGY, INC   |  | 6. State Oil & Gas Lease No.  |
| 3. Address of Operator<br>6401 HOLIDAY HILL RD BLDG #5   |  | 7. Lease Name or Unit Agreement Name<br>REMUDA SOUTH 25 STATE                                       |
| 4. Well Location<br>Unit Letter <u>E</u> : <u>2354'</u> feet from the <u>NORTH</u> line and <u>660'</u> feet from the <u>WEST</u> line<br>Section <u>25</u> Township <u>23S</u> Range <u>29E</u> NMPM County <u>EDDY</u> |  | 8. Well Number<br>501H  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)<br>3065'  |  | 9. OGRID Number<br>005380   |
|  |  | 10. Pool name or Wildcat<br>FORTY NINER RIDGE BONE SPRING WEST                                      |

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

| NOTICE OF INTENTION TO:                        |   | SUBSEQUENT REPORT OF:                                 |  |
|--|---|---|--|
| PERFORM REMEDIAL WORK <input 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 checked="" 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.

10/05/2020: Tst intermediate csg to 1500psi held 30 min – good test.  
10/04/2020 – 10/14/2020: Drill 7-7/8 production hole to 15655 TD, 8112TVD. Reached TD on 10/12/2020. KOP: 7882.  
10/12/2020: Set 5-1/2 20# P-110 BTC prod csg at 15645. PBTd: 15643. 10/14/2020: Stg 1: Cmt csg w/332sx 35/65 Poz, stg 2: 1380sx 35/65 Poz tail cmt, calculated TOC for tail @ 3350. CBL will be run on completion. Production casing test will be run on completion.  
10/14/2020: TA Cap and Skid rig.

XTO asked for SHL change on 5/26/20

Spud Date:

08/07/2020

Rig Release Date:

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

SIGNATURE Cassie Evans TITLE REGULATORY ANYLST DATE 10/19/2020

Type or print name CASSIE EVANS E-mail address: cassie\_evans@xtoenergy.com PHONE: 432.218.3671

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff Manager DATE 11/19/2020

Conditions of Approval (if any):