Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103	
District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240		E .	WELL API NO.	
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-44389 5. Indicate Type of L	0000
District III – (505) 334-6178	1220 South St. Francis Dr.		STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460	Santa Fe, NM 87505		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 Ur	ait Agraamant Nama
(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			REMUDA South 25 STATE	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 123H	
2. Name of Operator XTO ENERGY INC			9. OGRID Number 005380	
3. Address of Operator			10. Pool name or Wildcat	
6401 HOLIDAY HILL ROAD, BLDG 5, MIDLAND, TX 79707			Purple Sage;Wolfcamp	
4. Well Location			a.p.o cago;ooa	
Unit Letter F	: 2280 feet from the NORTH	line and 1965	feet from th	ne WEST line
Section 25				ounty Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3075 GL				
PERFORM REMEDIAL WORK [TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER: APD extension 13. Describe proposed or cor of starting any proposed proposed completion or in	CHANGE PLANS C MULTIPLE COMPL C mpleted operations. (Clearly state all pertwork). SEE RULE 19.15.7.14 NMAC. 1	EMEDIAL WORK COMMENCE DRILL ASING/CEMENT OTHER: Tinent details, and generated the company of the	JOB D	TERING CASING AND A Control Co
				RECEIVED
				JUN 2 8 2019
,			DISTR	IICTII-ARTESIAO.C.D.
Spud Date:	Rig Release Date:			
I hereby certify that the information	on above is true and complete to the best	of my knowledge :	and belief.	
~				
SIGNATURE Kelly Kardos TITLE Regulatory Coordinate		rv Coordinator	DATE	6/20/19
	1,1,55	<u>, </u>	DAIL	
Type or print name	E-mail address:		PHON	E:
For State Use Only				
APPROVED BY Conditions of Approval of any):	Brang TITLE Gre	ologist	DATE_	7-3-19.