

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

Form C-103  
 Revised July 18, 2013

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

WELL API NO. 30-015-46231
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Stan 32 State
8. Well Number 071H
9. OGRID Number 005380
10. Pool name or Wildcat Ross Draw; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2924'

**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 Energy, Inc.

3. Address of Operator  
6401 Holiday Hill Road, Bldg 5 Midland, Texas 79707

4. Well Location  
 Unit Letter H : 182 feet from the South line and 1245 feet from the East line  
 Section 32 Township 26S Range 30E NMPM County Eddy

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 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 checked="" 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.

XTO Energy would like to respectfully request a PA of the Stan 32 State 71H well with the below procedure -- 2/6-2/13/2020:

Plug 1: DP Severed 4210'. Pumped 350sx 14.8ppg Cl C. WOC. Tag TOC: 3501'.

Plug 2: Pump 82bbbs 14.8ppg Cl C. WOC 8 hours. Tagged TOC: 2724'.

Plug 3: Pump 82bbbs 14.8ppg Cl C. WOC 8 hours. Tag TOC: 2663'.

Plug 4: Pump 123bbbs 14.8ppg Cl C. WOC 8 hours. Tag TOC: 2662'.

Plug 5: Pump 35bbbs 14.8ppg Cl C cmt & 88bbbs 14.8ppg Cl C Neat. WOC 8 hours. Tag TOC: 2593'.

Plug 6: Pump 123bbbs Cl C Neat. WOC 8 hours. Tag TOC: 1523'.

Plug 7: Pump 82bbbs Cl C Neat. WOC. Tag TOC: 897'.

Plug 8: Pump 79bbbs Cl C Neat. WOC 8 hours. Tag TOC: 896'.

Plug 9: Pump 35bbbs Thixotropic blend. WOC 8 hours. Tag TOC: 897'.

Plug 10: Pump 60bbbs Thixotropic blend. WOC 8 hours. Tag TOC: 897'.

Plug 11: Pump 200bbbs Cl C Neat. WOC 8 hours. Sqz 11bbbs Cl C 14.8ppg in 4 Stages @ 897'. WOC 8 hours. Tag TOC: 440'. Test surf csg/cmt plug to 1500psi. Tst Good.

Plug 12: Pump 52bbbs 14.8ppg Cl C Neat. WOC 8 hours. Tag TOC: 94'.

Plug 13: Filled hole w/Quickrete fr/94'-Surface. Cut off WH. Install Dry Hole Marker.

Spud Date: 01/21/2020

Rig Release Date:

Approved for plugging of well bore only.  
 Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emnrd.state.nm.us

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

SIGNATURE Stephanie Rabadue TITLE Lead, Permitting & Regulatory DATE 03/19/2020

Type or print name Stephanie Rabadue E-mail address: stephanie\_rabadue@xtoenergy.com PHONE: 432-620-6714

**For State Use Only**

APPROVED BY: Gilbert Cordero TITLE Staff Mgr DATE 4/3/20  
 Conditions of Approval (if any):