

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

Received 04/09/2020
NMOCD District 2

Form C-103
Revised July 18, 2013

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

WELL API NO. 30-015-44305
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 REMUDA NORTH 25 STATE
8. Well Number 168H
9. OGRID Number 005380
10. Pool name or Wildcat Purple Sage; Wolfcamp
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3072' 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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator XTO ENERGY, INC.	
3. Address of Operator 6401 HOLIDAY HILL RD, BLDG 5, MIDLAND TX 79707	
4. Well Location Unit Letter <u>I</u> : <u>2380</u> feet from the <u>SOUTH</u> line and <u>705</u> feet from the <u>EAST</u> line Section <u>25</u> Township <u>23S</u> Range <u>29E</u> NMPM County <u>EDDY</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3072' GL	

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
XTO Energy Inc. respectfully submits the drilling operations of the referenced well.

*****AMENDED REPORT TO CAPTURE CSG PRESSURE TEST DURATION - 30 MINUTES*****

09/02/2019 Spud well 0630 hrs. Drill 20 in. hole. TD 350. Run 16 in 75# J-55 BTC csg to 350. Cmt w/550 sx Class C Tail cmt. Cmt to surf. WOC.
09/04/2019 Test csg to 1500 psi, 30 mins (good test). Drill 14-3/4 in hole.
09/05/2019 TD 14-3/4 hole to 3211.
09/06/2019 Run 11-3/4 in 47# J-55 BTC csg to 3211. Cmt w/2455 sx Class C Tail cmt. Cmt to surf. WOC.
09/09/2019 Test csg to 1500 psi, 30 mins (good test). Drill 10-5/8 in hole.
09/18/2019 TD 10-5/8 hole to 10,472. Run 8-5/8 32#HCL-80 BTC csg to 10,472. DV tool@3508.8
09/19/2019 Cmt w/1050 sx TXI Lead cmt, then 380 sx Class H Tail cmt. Stage 2 cmt w/1100 sx Class TXI Lead, 190 sx Class C Tail cmt. Cmt to surf.
09/21/2019 Test csg to 1500 psi, 30 mins (good test). Drill 7-7/8 in hole.
10/09/2019 TD 7-7/8 hole to 19,173.
10/11/2019 Run 5-1/2 in. 23# RYP-110 & CYP-110 BTC csg to 19,173.
10/12/2019 Cmt w/1950sx Class H Tail cmt. CBL to be run upon completion.
10/13/2019 Rig release@ 0600 hrs.

Spud Date: 9/2/19

Rig Release Date: 10/13/19

**** NMAC Rules: 19.15.7.11 & 19.15.7.14 C&D;
Within 10 days following the commencement of
drilling operations, the operator shall file a report
of casing and cement test within 10 days following
the setting of each string of casing or liner.**

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

SIGNATURE Cheryl Rowell TITLE Regulatory Coordinator DATE 4/9/20

Type or print name Cheryl Rowell E-mail address: cheryl_rowell@xtoenergy.com PHONE: 432-518-5734

For State Use Only

APPROVED BY: Gilbert Cordero TITLE Staff MGR DATE 4/22/2020
Conditions of Approval (if any):

Entered 04/27/2020 - KMS NMOCD