

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

NMOCD-REC'D: 09/04/2020

Form C-103
 Revised July 18, 2013

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

WELL API NO. 30-015-47117
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 South 25 State
8. Well Number 701H
9. OGRID Number 005380
10. Pool name or Wildcat Forty Niner Ridge Bone Spring, West
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3065' 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 Energy, Inc.

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

4. Well Location
 Unit Letter E : 2354 feet from the North line and 630 feet from the West line
 Section 25 Township 23S Range 29E NMPM County Eddy

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.

07/15-7/21/2020: Drill 14-3/4" hole to 3138'. Run 11-3/4" 54# J-55 BTC casing to 3134'. Cement w/2140sx (530bbls) CI H. No returns. Run TS. TOC: 250'. Perform 1" top off job with 93sx (23bbls) CI C. Cmt to surf. Run CBL.
 07/22/2020: Install TA cap. Rig release to next well on pad. Pressure test to be performed when returning after analyzing well.
 08/29/2020: Pressure test intermediate 1 casing to 1500psi for 30 minutes. Good test.

Entered - KMS NMOCD

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 Stephanie Rabadue TITLE Regulatory Supervisor DATE 08/29/2020

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

For State Use Only

APPROVED BY: [Signature] TITLE Staff Manager DATE 9/11/2020

Conditions of Approval (if any):