Submit 1 Copy To Appropriate District Office	State of New Mexico			Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO. 30-015-44321	
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease	
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X	FEE 🗌
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87	/303	6. State Oil & Gas	Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or	Unit Agreement Name
(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.)			REMUDA SOUTH 30 STATE	
1. Type of Well: Oil Well X Gas Well Other			8. Well Number 902H	
2. Name of Operator XTO ENERGY INC			9. OGRID Numbe	r 005380
3. Address of Operator 500 W. ILLINOIS, STE. 100, MIDLAND, TX 79701			10. Pool name or NASH DRAW; DELA	Wildcat WARE/BS (AVALON SAND)
4. Well Location	2210 NODEL			
Unit Letter E : Section 30	2310 feet from the NORTH Township 23S Ra	H line and 66 ange 30E	00 feet from NMPM	the <u>WEST</u> line County EDDY
Section 30	11. Elevation (Show whether DR,			County EDD1
	3108 GR			
12. Check A	Appropriate Box to Indicate N	ature of Notice,	Report or Other I	Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR				ALTERING CASING
				P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	IT JOB	
DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM				
OTHER:		OTHER:		
	leted operations. (Clearly state all pork). SEE RULE 19.15.7.14 NMAC			
	•			
	tfully requests to change the I	BOP from a Car	neron 5M Double	Ram to a Cameron 3M
Double Ram BOP with	a Test Pressure of 3000.			
	10 2-	25-17		
	Accepted for record		8.58	5.011.00NOFD\/ARION
	•		N	A OIL CONSERVATION ARTESIA DISTRICT
				JUL 28 2017
Spud Date:	Rig Release Da	nte:		RECEIVED
Sp. 3 3 4 5 4 5 4 5 6 5 6 5 6 6 6 6 6 6 6 6 6 6				
I hereby certify that the information	ahove is true and complete to the h	est of my knowledg	ge and helief	
	ΛΛ	est of my knowledg	ge and benef.	
SIGNATURE MILLE ON	TITLE_Regu	DA^	ΓΕ_7/21/2017	
Type or print name <u>Jessica Bonilla</u> <u>For State Use Only</u>	a E-mail address	s: jessica_bonilla@	extoenergy.com PHO	ONE: 432-620-6704
APPROVED BY: Conditions of Approval (if any):	_ TITLE		DAT	`E