

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

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

WELL API NO. 30-025-04612
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 Eunice Monument South Unit
8. Well Number 271
9. OGRID Number 005380
10. Pool name or Wildcat Eunice Monument Grayburg San Andres

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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator XTO Energy Inc.	
3. Address of Operator 200 North Loraine, Suite 800, Midland, Texas 79701	
4. Well Location Unit Letter <u>B</u> : <u>660</u> feet from the <u>North</u> line and <u>1980</u> feet from the <u>East</u> line Section <u>11</u> Township <u>21-S</u> Range <u>36-E</u> NMPM Lea County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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 type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

12/3/04 MIRU Basic Well Service (Richard). ND WH. NU BOP. SWI & SDON.

12/4/04 Rel pkr. POOH w/tbg & LD pkr. PU RIH w/4-1/4" bit, 6 jts of 2-3/8", 4.7#, J-55, EUE, 8rd YB tbg, 7" Csg scrapper & 113 jts of 2-3/8", 4.7#, J-55, EUE, 8rd IPC tbg. Tagged fill @ 3694'. POOH w/tbg & tools. SWI & SDON.

12/5-6/04 SDF

12/7/04 RU Hydrotest pipe tsters. Press tstd 2-3/8" IPC tbg to 5,000 psig below slips. RIH w/ 7" Lokset pkr w/FL on/off tool & 1.781 "F" SS seal nipple & 2-3/8" pmp out plug w/WL entry guide on 116 jts 2-3/8", 4.7#, J-55, EUE, 8rd IPC tbg. Tbg tstd good. RD Hydrotest. Set pkr @ 3,576' & rel on/off tool. RU Key pmp & vac trk. Circ well w/145 bbls pkr fluid. ND BOP. Latched onto on/off tool. NU wellhead. Pressd TCA to 540 psig for 30" MIT test, held ok. Test was witnessed by Johnny Robinson w/NMOCD. Rel press on TCA. Pressd 2-3/8" tbg to 1,800 psig and ruptured pmp out plug. RD Key trks. Could not RDPU due to high winds. RWTI.

Qty	Type	Description	Cond	Depth	Depth	Length
1	manual	Other - 2-3/8" Wireline entry guide	New	3,586.53	3,589.94	0.41'
1	manual	Other - 7" Lokset injection pkr	New	3,582.05	3,586.53	4.08'
1	manual	Other - pkr on/off tool	New	3,581.05	3,582.05	1.40'
116	Tubing	2-3/8", 4.7#, J-55, EUE, 8rd, IPC Tubing (ICO 505)	Same	11.00	3,581.05	3,570.05'

12/8/04 RDMO PU. RWTI.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE DeeAnn Kemp TITLE Regulatory Tech DATE 12/10/04

Type or print name DeeAnn Kemp E-mail address: \_\_\_\_\_ Telephone No. 432-620-6724

For State Use Only

APPROVED BY: Gay W. Wink

Conditions of Approval (if any):

OFFICE FIELD REPRESENTATIVE II/STAFF MANAGER  
DATE DEC-22 2004

