

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

Form C-103
May 27, 2004

HOBBS OCD

JUL 12 2011

RECEIVED

WELL API NO. 30-025-04426
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 166
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 checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other
2. Name of Operator XTO ENERGY, INC. ATTN: PATTY URIAS
3. Address of Operator 200 N. LORAIN, SUITE 800, MIDLAND, TEXAS 79701
4. Well Location Unit Letter M : 600 feet from the SOUTH line and 660 feet from the WEST line Section 36 Township 20S Range 36E NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,552' - GL
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input checked="" type="checkbox"/>
Pit type STEEL 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 *NONE WITHIN 1,000'.

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

CONDITIONS OF PA APPROVAL: Approved as to plugging of the Well Bore. Liability under bond is retained until surface restoration is completed. OCD Hobbs office needs C-103 "Check Off List for Surface Inspection".	INTENTION TO: PLUG AND ABANDON <input type="checkbox"/> REPAIR PLANS <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
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13. Describe proposed or completed work (including estimated date of starting any proposed work). SEE N. or recompletion.
state all pertinent details, and give pertinent dates, including estimated date of Multiple Completions: Attach wellbore diagram of proposed completion

07/03/11: TAG EXISTING 4" CIBP @ 3,890'; PRESSURE UP ON CASINGS TO 500# - HELD OK; CIRC. WELL W/ PXA MUD; MIX X PUMP A 30 SX. CMT. PLUG @ 3,890'-3,590' (CALC.); PERF. 5-1/2" CSG. @ 1,280' X MIX X SQZ. A 25 SX. CMT. PLUG @ 1,280'; WOC.

07/05/11: TAG TOP OF CMT. PLUG @ 1,144'; PERF. 5-1/2" CSG. @ 315' X MIX X SQZ. A 30 SX. CMT. PLUG @ 315'; WOC X TAG TOP OF CMT. PLUG @ 250' (OK'D BY NMOCD); PERF. 5-1/2" CSG. @ 60' X MIX X CIRCULATE TO SURFACE A 40 SX. CMT. PLUG @ 60'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON STEEL PLATE TO CASINGS X INSTALL DRY HOLE MARKER.

WELL PLUGGED AND ABANDONED 07/05/11.

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 David A. Eyer TITLE AGENT DATE 07/06/11

Type or print name DAVID A. EYLER

E-mail address: DEYLER@MILAGRO-RES.COM

Telephone No. (432) 687-3033

For State Use Only

APPROVED BY [Signature] TITLE STAFF MEMBER DATE 7-18-2011

Conditions of Approval, if any:

JUL 18 2011