

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

Form C-103  
 Revised July 18, 2013

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

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.)		WELL API NO. 30-025-23648
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input checked="" type="checkbox"/> INJ		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CROSS TIMBERS ENERGY, LLC		6. State Oil & Gas Lease No. 312479
3. Address of Operator 400 W 7TH STREET FORT WORTH, TX 76102		7. Lease Name or Unit Agreement Name NORTH VAC ABO UNIT
4. Well Location Unit Letter <u>J</u> : <u>1980</u> feet from the <u>S</u> line and <u>1780</u> feet from the <u>E</u> line Section <u>27</u> Township <u>17-S</u> Range <u>34-E</u> NMPM County <u>LEA</u>		8. Well Number 149
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4040' GL		9. OGRID Number 298299
		10. Pool name or Wildcat VACUUM; ABO, NORTH

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

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <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.

Est'd MIRU 01/10/2021

- 1) POOH w/ 2-3/8" tbg and seal assembly, scan tbg and replace as needed..
- 2) RBIH w/ Tbg String and redressed seal assembly. Test in the hole.
- 3) Sting into packer @ 8,513'. Pressure test backside to 350 psi.
- 4) Pull up from packer. Circulate backside with packer fluid. Latch back in to packer. Contact NMOCD & run MIT test per OCD representative's directive.

Spud Date:

01/31/1971

Rig Release Date:

02/24/1971

**Condition of Approval: notify  
 OCD Hobbs office 24 hours  
 prior of running MIT Test & Chart**

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

SIGNATURE Samanntha Avarello TITLE Regulatory Technician DATE 12/28/2020

Type or print name Samanntha Avarello E-mail address: savarello@mspartners.com PHONE: 817-334-7747

**For State Use Only**

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 12/29/20

Conditions of Approval (if any):