

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87249
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
HOBBS OCD
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
May 27, 2004

RECEIVED
AUG 24 2011

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. 30-025-31425
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator XTO ENERGY, INC. ATTN: PATTY URIAS		6. State Oil & Gas Lease No.
3. Address of Operator 200 N. LORAIN, SUITE 800, MIDLAND, TEXAS 79701		7. Lease Name or Unit Agreement Name: EUNICE MONUMENT SOUTH UNIT
4. Well Location Unit Letter L : 2630 feet from the SOUTH line and 10 feet from the WEST line Section 04 Township 21S Range 36E NMPM County LEA		8. Well Number 625
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,584' - GL		9. OGRID Number 005380
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 _____ bbs; Construction Material *NONE WITHIN 1,000'.		10. Pool name or Wildcat EUNICE MONUMENT; GRAYBURG/SAN ANDRES

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☒
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

08/21/11: TAG EXISTING CIBP + CMT. @ 3,612'; CIRC. WELL W/ PXA FLUID; MIX X PUMP A 25 SX. CMT. PLUG @ 3,612'; WOC X TAG CMT. PLUG @ 3,337'; MIX X PUMP A 25 SX. CMT. PLUG @ 2,600'-2,400' (CALC.); MIX X PUMP A 25 SX. CMT. PLUG @ 1,320'.
08/22/11: TAG CMT. PLUG @ 1,080'; MIX X CIRC. TO SURF. A 30 SX. CMT. PLUG @ 250'-3'; DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON STEEL PLATE TO CASINGS X INSTALL DRY HOLE MARKER.

Approved for plugging of well bore only.
Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under

WELL PLUGGED AND ABANDONED 08/22/11.

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 08/23/11
E-mail address: DEYLER@MTLACRO-RES.COM
Type or print name DAVID A. EYER Telephone No. (432) 687-3033

For State Use Only

APPROVED BY [Signature] TITLE STAFF NGR DATE 8-29-2011
Conditions of Approval, if any:

AUG 29 2011