

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
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
June 19, 2008

RECEIVED
OCT 06 2011
HOBBS
CONSERVATION DIVISION
2200 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.)	
1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐	WELL API NO. 30-025-04634
2. Name of Operator XTO Energy, Inc.	5. Indicate Type of Lease STATE ☒ FEE ☐ Fed ☒
3. Address of Operator 200 N. Lorraine, Ste. 800 Midland, TX 79701	6. State Oil & Gas Lease No.
4. Well Location Unit Letter M : 660 feet from the South line and 660 feet from the West line Section 14 Township 21S Range 36E NMPM County Lea	7. Lease Name or Unit Agreement Name: Emice Monument South Unit
	8. Well Number 429
	9. OGRID Number 005380
	10. Pool name or Wildcat Emice Monument; Grayburg-San Andres
	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3577' GL

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 COMPL ☐
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/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.

XTO would like to request to TA this well due to the well being uneconomical to produce.

Rule 19.15.25.14

Set CIBP, RBP or Packer within 100 feet of uppermost perfs or open hole Pressure test to 500 psi for 30 minutes with a pressure drop of not greater than 10% over a 30 minute period

Accepted for Record Only

ECG 10-6-2011

Spud Date:

Rig Release Date:

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

SIGNATURE Sharon Hindman TITLE Regulatory Analyst DATE 09/27/2011
sharon.hindman@xtoenergy.com
Type or print name Sharon Hindman E-mail address: sharon.hindman@xtoenergy.com PHONE 432-620-6741

For State Use Only

APPROVED E. [Signature] TITLE [Signature] DATE [Signature]
Conditions of Approval (any):

EUNICE MONUMENT SOUTH UNIT #429

