Submit 3 Copies To Appropriate District State of New Mexico	Form C-103
Office District 1 1625 N. French Dr., Hobbs, NM 87240 District II	June 19, 2008 WELL API NO.
OIL CONSERVATION DIVISION	30-025-02093 5. Indicate Type of Lease
	STATE X FEE
District IV.	6. State Oil & Gas Lease No.
1220 S. 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.)	7. Lease Name or Unit Agreement Name: Bridges State
1. Type of Well: Oil Well Gas Well Other Injection	8. Well Number 47
2. Name of Operator	9. OGRID Number
XTO Energy, Inc. 3. Address of Operator	005380 10. Pool name or Wildcat
200 N. Loraine, Ste. 800 Midland, TX 79701	Vacuum: Grayburg-San Andres
4. Well Location	,
Unit Letter K : 1980' feet from the South line and	1980' feet from the West line
Section 24 Township 17S Range 34E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: SUBS	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	NG OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JO	ов 🗆
DOWNHOLE COMMINGLE	
	_
OTHER: TA Extension Request X 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 is requesting a 6 month *only* TA extension on this well.	
Condition of Approval: notify	
OCD Hobbs office 24 hours	
prior of running MIT Test & Chart	
· · · · · · · · · · · · · · · · · · ·	
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 Water lines Boulaton	(Applyor
SIGNATURE TITLE Regulatory patty urias@xtoe	
Type or print name Patty Urias E-mail address: PHONE 432-620-4318	
For State Use Only	
APPROVED BY TITLE STATE Conditions of Approval (if any):	NATE 12-1-201

WELL NAME: BRIDGES STATE #47 TA'D LOCATION: 1980' FSL & 1980' FWL, SEC 24, T 175 & R 34E FORMATION: GRAYBURG/ SAN ANDRES SPUD DATE: 10-17-39

IP:

COUNTY/STATE: LEA, NM LEASE: BRIDGES STATE CURRENT STATS: TA'D COMPL DATE: 11-14-39 API No: 30-025-02093



TA'D GL: 4018' 10 %" CSG SET @ 824'. CMT W/250 SX. CIRC CMT. TOC @ 2845' BY CALC