Submit 3 Copies To Appropriate District Office District I State of New M Charles and Natu	exico iral Recources	June 19, 2008
LES MANAGES		WELL API NO. 30-025-09511
1625 N French Dr., Hobbs NM 87240 District II 1301 W Grand Ave, Artesia, NESS21, 5 2012 CONSERVATIO	N DIVISION	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd , Aztec NM 87410 District IV 1220 S St Francis Dr , San Fe, NM 87505		STATE FEE
		6. State Oil & Gas Lease No.
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: Eugene Coates
1. Type of Well: Oil Well X Gas Well Other		8. Well Number 7
2. Name of Operator XTO Energy, Inc.		9. OGRID Number 005380
3. Address of Operator		10. Pool name or Wildcat
200 N. Loraine, Ste. 800 Midland, TX 79701		Jalmat: Tan-Yates - 7 Rvrs
4. Well Location		
Unit Letter L: 1980 feet from the South line and 660 feet from the West line		
Section 3 Township 24S	Range 36E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3412 GL		
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data		
NOTICE OF INTENTION TO: SUB		SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		☐ ALTERING CASING ☐
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS. P AND A	
PULL OR ALTER CASING	CASING/CEMENT JO	DR
DOWNHOLE COMMINGLE		
OTHER	OTHER: MIT - For	
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.		
02/01/12: Ran good MIT for TA extension only. 3 year extension approved by E.L. Gonzales 12/01/2011. Chart attached.		
This Approval of Temporary Abandonment Expires		
This Approval of Ton	S 2-1-201	
Aballuoliilloin — P		
Spud Date: Rig Relea	ase Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE SIGNATURE TITLE Regulatory Analyst DATE 02/02/2012		
Type or print name Ann Perales E-mail address: PHONE 432-620-4336		
For State Use Only		
APPROVED BY DATE 2-16-2012		
Conditions of Approval (if any):		FEB 1 6 2012

FEB 1 6 2012

