

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87409  
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

HOBBS OCD  
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State of New Mexico  
Energy, Minerals and Natural Resources  
CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
May 27, 2004

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. 30-025-29586 ✓
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>INJECTION</u>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> ✓
2. Name of Operator XTO ENERGY, INC. ATTN: PATTY URIAS		6. State Oil & Gas Lease No.
3. Address of Operator 200 N. LORRAINE, SUITE 800, MIDLAND, TEXAS 79701		7. Lease Name or Unit Agreement Name: EUNICE MONUMENT SOUTH UNIT ✓
4. Well Location Unit Letter <u>J</u> : <u>2080</u> feet from the <u>SOUTH</u> line and <u>1880</u> feet from the <u>EAST</u> line Section <u>07</u> Township <u>21S</u> Range <u>36E</u> NMPM County <u>LEA</u>		8. Well Number 328 WIW ✓
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"/>		10. Pool name or Wildcat EUNICE MONUMENT; GRAYBURG/SAN ANDRES
Pit type <u>STEEL</u> 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 <u>*NONE WITHIN 1,000'.</u>		

<b>Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data</b> <b>APPROVED FOR PLUGGING OF WELL BORE ONLY.</b> Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emnrd.state.nm.us/oed PULL OR ALI... OTHER: _____	<b>ABANDON TO:</b> <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: WELL PLUGGED AND ABANDONED 03/06/12	<b>SUBSEQUENT REPORT OF:</b> <input type="checkbox"/> ALTERING CASING <input checked="" type="checkbox"/> PLUG AND ABANDONMENT
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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.

03/05/12: TAG EXISTING 5-1/2" CIBP @ 3,755'; PRES. UP TON 5-1/2" CSG. TO 700# X HELD FOR 10 MINS. (OK'D BY NMOCD); CIRC. WELL W/ PXA FLUID; MIX X PUMP A 25 SX. OMT. PLUG @ 3,755'-3,600' (CALC.); MIX X PUMP A 25 SX. OMT. PLUG @ 2,830'-2,680' (CALC); MIX X PUMP A 25 SX. OMT. PLUG @ 1,300'-1,150'; MIX X CIRC. TO SURFACE A 70 SX. OMT. PLUG @ 420'-3'.

03/06/12: DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON STEEL PLATE TO CASINGS X INSTALL DRY HOLE MARKER.

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 03/06/12  
E-mail address: DEYLER@MILAGRO-RES.COM  
Type or print name DAVID A. EYLER Telephone No. (432) 687-3033

For State Use Only  
APPROVED BY [Signature] TITLE STAFF MGR DATE 3-8-2012  
Conditions of Approval, if any: \_\_\_\_\_

MAR 08 2012