Submit 3 Copies To Appropriate District State of New Mexico	Form C-103
District i District i 1625 N. French Dr., Hobbs, NM 88240 District II	WELL API NO.
f301 W. Grand Ave., Artesia, NM 88210OIL CONSERVATION DIVISIODistrict III1220 South St. Francis Dr.	5. Indicate Type of Lease       STASEFEE
1000 Rio Brazos Rd., Aztec, NM 87410Santa Fe, NM 87505District IV1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No. N/A
87505 SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	8. Well Number
1. Type of Well: Oil Well       Gas Well       Other Injector         2. Name of Operator	9. OGRID Number
XTO Energy Inc.	005380
3. Address of Operator 200 N. Loraine, Ste 800, Midland, Texas 79701	10. Pool name or Wildcat Arrowhead - Grayburg
4. Well Location	
Unit Letter       G: 2310       feet from the       North       line and       2310       feet from the       East       line         Section       12       Township       22-S       Range       36-E       NMPM       Lea       County	
Section 12 Township 22-S Range 36-E 11. Elevation (Show whether DR, RKB, RT,	
Pit or Below-grade Tank Application 🗌 or Closure 🗌	
Pit typesteelDepth to Groundwater200'Distance from nearest fresh water well1000+ Distance from nearest surface water1000+	
Pit Liner Thickness: mil Below-Grade Tank: Volume	bbls; Construction Material
12. Check Appropriate Box to Indicate Nature of I	Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
	NCE DRILLING OPNS. PAND 1011 12 13 24
PULL OR ALTER CASING MULTIPLE COMPL CASING	
OTHER: OTHER: OTHER:	CEMENT JOB
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. $\langle \Sigma \rangle = \langle \nabla \rangle \langle \Sigma \rangle \langle \nabla \rangle \langle \nabla$	
1) MIRU PU, ND WH, NU BOP. MI & Rack 2 7/8" WS 2) PU & RIH w/ Tapered Mill on 2 7/8" WS to base of 5 ½" csg. POH w/ WS & tools.	
3) RU WL. RIH w/ CIBP on WL. Set CIBP @ +/- 3635' (+/- 20' above 5 ½" csg shoe). POH w/ WL. 4) RIH w/ 4.5" 11.35 # J-55 FJ Liner to +/- 3610'. RU BJ Services. Pump 110 sx Cl C + additives {BA-10 (bonding improvement), CD	
32 (thinning agent), EC-1 (bonding improvement) & 3% NaCl (accelerator). RD BJ Services. WOC for 24 hours.	
NOTE: $3610'$ of $5\frac{1}{2}'' \ge 4\frac{1}{2}''$ annular volume is 0.0266 cu ft / ft $\ge 3610'$ is 96.03 cu ft. 0% excess is 70 sx Cl C + add & 50% excess is 105 sx CL C + add	
5) RIH w/ bit on 2 7/8" WS. RU reverse unit. Drill out cement & CIBP. RIH to top of sand plug. CO sand plug (3711' to 3890'). POH	
<ul> <li>w/ bit &amp; WS. RD reverse unit.</li> <li>6) RIH w/ treating packer on 2 7/8" WS. Test in hole to 5000 psi below slips. Set packer @ +/- 3575'. Load backside with fresh water.</li> </ul>	
7) RU Cudd. Establish rate on FW. Pump 5000 gal ACIDTOL 15% HCL 9010 in 4 stages per the attached pump schedule using 3000	
lbs Coarse Rock Salt in 10# Brine as diversion. Pump job @ 4-5 bpm @ 4000 psi maximum pressure. Flush to bottom of OH with fresh water. RD Cudd .	
8) If necessary, flow back well to tank with steel lines.	
<ul> <li>9) Once well is dead, release packer &amp; TOH w/ packer &amp; WS.</li> <li>10) TIH w/ 2 3/8" IPC injection tubing &amp; packer. Set packer @ +/- 3600'.</li> </ul>	
11) Perform MIT & return well to injection. Put well back on injection @ 500 BV	VIPD & monitor pressures.
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 wosed according to NMOCD guidelines ], a general permit ] or an (attached) alternative OCD-approved plan ].	
SIGNATURE DUAL TITLE Reg	gulatoryDATE4/4/05
Type or print nameDeeAnn KempE-mail address:Telephone No. 432-620-6724	
For State Use Only OC FIELD REPRESENTATIVE II/STAFF MANAGER	
APPROVED BY: <u>Hary W. Wink</u> TITLE Conditions of Approval (if my):	APR 1 8 2005 8 1 99