Submit 3 Copies To Appropriate District State of New Mexico  Office Fnergy Minerals and Natural Resources	Form C-103
District I	June 19, 2008
1625 N. French Dr., Hobbs, NM 87240 District II	WELL API NO. 30-025-23288
District III  District III  1301 W. Grand Ave., Artesia, NM 8820138 OCH CONSERVATION DIVISION District III  1220 South St. Francis Dr.	5. Indicate Type of Lease
	STATE 🗷 FEE 🗆
1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 00 2 8 2012 87505  Santa Fe, NM 87505	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: North Vacuum Abo Unit
1. Type of Well: Oil Well Gas Well Other Injection	8. Well Number
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	Vacuum; Abo, North
4. Well Location	
Unit Letter <u>H</u> : 1980' feet from the North line and	660' feet from the East line
Section 15 Township 175 Range 34E	NMPM County Lea
11. Elevation (Show whether DR, RRD, RT, OR, etc.)	
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	
PULL OR ALTER CASING	OR []
DOWNHOLE COMMINGLE LJ	
OTHER: OTHER: MIT	X
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.	
10/30/2012: Good MIT test performed. See chart copy attached. Origina	l submitted to the NMOCD.
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 ALDO AND ROLL TITLE Regulatory Analyst DATE 11/10/2012	
SIGNATURE CAN CONTROL Regulator stephanie rabadue@	
Type or print name Stephanie Rabadue E-mail address:	PHONE <u>432-620-6714</u>
For State Use Only	
APPROVED BY TITLE Conditions of Approval (if any):	DEC 0 3 1012 Chan
	DEC 0 3 \$012 C) 40

