

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
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

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
June 19, 2008

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-23693  
5. Indicate Type of Lease  
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.)

1. Type of Well:  
Oil Well ☐ Gas Well ☐ Other Injection

2. Name of Operator  
XTO Energy, Inc.

3. Address of Operator  
200 N. Loraine, Ste. 800 Midland, TX 79701

4. Well Location  
Unit Letter B : 780' feet from the North line and 2135' feet from the East line  
Section 13 Township 17S Range 34E NMPM County Lea

7. Lease Name or Unit Agreement Name:  
North Vacuum Abo Unit

8. Well Number  
152

9. OGRID Number  
005380

10. Pool name or Wildcat  
Vacuum; Abo, North

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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: MIT ☒

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. Original submitted to NMOC.

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 Stephanie Rabadue TITLE Regulatory Analyst DATE 11/10/2012  
Type or print name Stephanie Rabadue E-mail address: stephanie\_rabadue@xtoenergy.com PHONE 432-620-6714

For State Use Only

APPROVED BY [Signature] TITLE DIST. MGR DATE 11-29-2012

Conditions of Approval (if any):

DEC 03 2012

Chm

