

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  
**HOBBS OGD**  
**DEC 17 2012**  
**RECEIVED**  
 OIL CONSERVATION DIVISION  
 220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 June 19, 2008

WELL API NO. <b>30-025-04288</b> ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> <i>Fed</i>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <b>Eunice Monument South Unit B</b>
8. Well Number <b>901</b>
9. OGRID Number <b>005380</b>
10. Pool name or Wildcat <b>Monument; Grayburg-San Andres</b>

**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 *Inj*

2. Name of Operator  
**XTO Energy, Inc.**

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

4. Well Location  
 Unit Letter **C**; **660** feet from the **North** line and **2310** feet from the **West** line  
 Section **23** Township **20S** Range **36E** NMPM County **Lea**

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

SUBSEQUENT REPORT OF:

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

OTHER:  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.

10/24/2012: Good MIT test performed. See chart copy attached. Original submitted to the 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

**FOR RECORD ONLY**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 12-18-2012  
 Conditions of Approval (if any):

