Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 May 27, 2004
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, willierars and tradular Resources		WELL API NO.
District II	OIL CONSERVATION DIVISION		30-025-10095
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE X  6. State Oil & Gas Lease No.
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505			o. State Off & Gas Lease No.
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 A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Amerika d Carakana III.
PROPOSALS.)			Arrowhead Grayburg Unit  8. Well Number 183
1. Type of Well: Oil Well X Gas Well Other			
2. Name of Operator XTO Energy, Inc.		9. OGRID Number 005380	
3. Address of Operator 200 N. Loraine		10. Pool name or Wildcat	
Midland, TX 79701		Arrowhead Grayburg Unit	
4. Well Location			
Unit Letter C: 660 feet from the North line and 1980 feet from the West line			
Section 7 Township 22S Range 37E NMPM Lea County			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3439' GR  Pit or Below-grade Tank Application □ or Closure □			
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water  Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   P AND A X			
DILL OD ALTER CACING TO MILLERY FOR THE CACING OF MENT 100			- 105
. 022 0.(7,12.12.( 0,10.110	MOETH EE OOM! E	OASING/CENIEN	
OTHER: OTHER:			
OTHER:  OTHER:  OTHER:  OTHER:  OTHER:  OTHER:  OTHER:  OTHER:  Is Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated dates of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  Approved as to plugging of the Well Bore Liability under bond is retained until surface restoration is completed.  Approved as to plugging of the Well Bore Liability under bond is retained until surface restoration is completed.  The proposed completion or recompletion or recompletion or recompletion.  Approved as to plugging of the Well Bore Liability under bond is retained until surface restoration is completed.  The proposed completion or recompletion or recompletion or recompletion.  The proposed on 9-25-2005, PA well from 2305'.  The proposed of the Well Bore Liability under bond is retained until surface restoration is completed.  The proposed of the Well Bore Liability under bond is retained until surface restoration is completed.  The proposed of the Well Bore Liability under bond is retained until surface restoration is completed.  The proposed of the Well Bore Liability under bond is retained until surface restoration is completed.			
or recompletion.			
		Approved as to p	olugging of the Well Bore.
1. Well was plugged on 9-25-2005, PA well from 2305'.			and is retained until
2. Pmp 75 sxs Cl "C" CMT w/ 1% CACL. surface restoration is completed.			
3. TIH & tagged TOC @ 1484'			
4. Pmp 50 sxs Cl "C" cmt w/ 2% CACL.  5. Tagged TOC @ 906', bottom of tbg @355'			
6. Pmp 60 sxs Cl "C" neat, circ to surf, good cmt returns to half moon tank			
7. Top off csg w/ cmt			
8. Cut csg head off, surf riser & weld on PA marker.			
			1/8/92021222
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 Velma	Pallardo TITLE	Production Analyst	DATE 9-28-2005
SIGNATURE VICTOR TITLE Production Analyst DATE 9-28-2005			
Type or print name Velma Gallardo E-mail address: velma_gallardo@xtoenergy.com Telephone No. 432-620-4315			
APPROVED BY:  Conditions of Approval (if any):  TITLE BERERESENTATIVE II/STAFF MANAGER OCT 0 3 2005  Conditions of Approval (if any):			
APPROVED BY: Lay W-Will TITLE ID REPRESENTATIVE 11/STAFF MAIN OCT 0 3 2005			
Conditions of Approval (if any):			