Submit 3 Copies To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	June 19, 2008
1625 N. French Dr., Hobbs, NM 87240 District.II	OIL CONSERVATION DIVISION	WELL API NO. 30-025-04578
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 X FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM	,	6. State Oil & Gas Lease No.
87505		.,,,,
(DO NOT USE THIS FORM FOR PROP	CES AND REPORTS ON WELLS DISALS TO DRILL OR TO DEEPEN OR PLUG BACK TO CATION FOR PERMIT" (FORM C-101) FOR SUCH HOBBS OCD	7. Lease Name or Unit Agreement Name: Eunice Monument South Unit
 Type of Well: Oil Well Gas Well Gas Well 	Other Injection 1 0 2012	8. Well Number
2. Name of Operator	APR 1 9 2013	9. OGRID Number
XTO Energy, Inc.		005380
3. Address of Operator	RECEIVED	10. Pool name or Wildcat
200 N. Loraine, Ste. 800 4. Well Location	Midland, TX 79701	Eunice Monument; Grayburg-San Andres
T. WON ECOLUTION		
Unit Letter	2310 feet from the South line and	d 2310 feet from the East line
Section 9	Township 21s Range 36E	E NMPM County Lea
	11. Elevation (Show whether DR, RKB, RT, C	FR, etc.)
12 Check A	ppropriate Box to Indicate Nature of Not	ice Report or Other Data
12. Check A	ppropriate box to mate are waiting of Not	ice, Report, of Other Data
NOTICE OF INT	ENTION TO:	CURCEOUENT DEDOOT OF.
	·	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WO	ORK ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE D	P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEME	ENT JOB
DOWNHOLE COMMINGLE		
OTHER:	OTHER: MIT	/ Bradenhead
13. Describe proposed or completed		nd give pertinent dates, including estimated date
		Attach wellbore diagram of proposed completion
03/13/2013: A good MIT /	Bradenhead have been run. Chart and for	n attached.
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Spud Date:	Rig Release Date:	
hereby certify that the information	above is true and complete to the best of my know	uladge and hallof
Thereby certify that the information		vieuge and bener.
SIGNATURE STANDING	Kamalu TITLE Requ	latory Analyst DATE 03/21/2013
	stephanie raba	adue@xtoenergy.com
Type or print name <u>Stephanie Rab</u>	E-mail address:	PHONE_432-620-6714
For State Use Only		1/
APPROVED BY	TITLE SI.1	DATE 4-22-201
Conditions of Approval (If any):		
	,	APR 2 3 2013

