Submit 3 Copies To Appropriate District	State of New Mexico		•	Form C-103
Office District 1	Energy, Minerals and Natural Resources		WELL API NO.	June 19, 2008
1625 N. French Dr., Hobbs, NM 87240 District II	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		30-025-04684	
1301 W. Grand Ave., Artesia, NM 88210 District III			5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		STATE FE	
1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil & Gas Lease No	0.
SUNDRY NOTIC (DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLIC		OR PLUG BACK TO A	7. Lease Name or Unit Agre Eunice Monument South t	1
PROPOSALS.)   1. Type of Well:   Oil Well   X   Gas Well	Other	HOBBS OCD	8. Well Number	
2. Name of Operator		APR 1 9 2013	9. OGRID Number	,
XTO Energy, Inc.		AT IT I DO	005380	
3. Address of Operator			10. Pool name or Wildcat	
200 N. Loraine, Ste. 800 4. Well Location	Midland, TX 79701	RECEIVED	Eunice Monument; Graybu	<u>irg-San Andres</u>
_	SSO Seek Seem the Nor		1000 C . C . d	77
Unit Letter <u>B</u> :	660 feet from the No.	th line and	1980 feet from the	East line
Section 18	Township 218 11. Elevation (Show whether	Range 36E	NMPM County	Lea
	A	DR, RRB, RT, GR, et. 21' GL		
12. Check A	ppropriate Box to Indicate	Nature of Notice, I	Report, or Other Data	
•		,	r · , · · · · · · · · · · · · · · · · ·	
NOTICE OF INTE	ENTION TO:	SUB	SEQUENT REPORT C	)F:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		☐ ALTERING CASING ☐		
TEMPORARILY ABANDON				
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT JO	<del></del>	^
DOWNHOLE COMMINGLE	MOETH EE OOM E	O'NON O'DEWLETT SO		
DOMNHOLE COMMUNICE				
OTHER:		OTHER: MIT / Bra	adenhead	x
13. Describe proposed or completed of starting any proposed work). or recompletion.	l operations. (Clearly state all pe SEE RULE 1103. For Multiple	rtinent details, and giv	e pertinent dates, including es	stimated date
03/13/2013: XTO Energy rai	n a good MIT / Bradenhead.	Chart & Form atta	iched.	
	_			
			•	<i>:</i> .
	,	·: [	· · · · · · · · · · · · · · · · · · ·	•
Spud Date:	Rig Relea	se Date:		
I hereby certify that the information a	hove is true and complete to the	hest of my knowledge	e and helief	· · · · · · · · · · · · · · · · · · ·
	O ( A -	best of my knowledge	c and benef,	
SIGNATURE STATISTICS	Kalmalue TIT		ry Analyst DATE	03/21/2013
Type or print name <u>Stephanie Raba</u>	adue E-m	stephanie_rabadue@ ailaddress:		432-620-6714
		/		•
For State Use Only	/ // /	DI+	Mit I	12 20 12
APPROVED BY Conditions of Approval (if any):	TIT	LE S	DATE -	
Conditions of Approximent (11 ang).	/			Λ
		·	APR 2 3 20	13.
			711 IV 169 6 20	<i>A</i>

