Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C	
District I	Energy, Minerals and Natural Resources		WELL API NO.	, 2008
1625 N. French Dr., Hobbs, NM 87240 District II	OH CONGEDUATION DIVIGION		30-025-04616	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410	•		STATE FEE	
District IV	Santa Fe, NM	8/303	6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Off & Gas Ecase No.	
(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPLI PROPOSALS.)		OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name Eunice Monument South Unit	ne:
1. Type of Well: Oil Well X Gas Well	Other	HOBBS OCD	8. Well Number 312	
2. Name of Operator		4 D D 1 1 1 0 0040	9. OGRID Number	
XTO Energy, Inc.		APR 1 9 2013	005380	
3. Address of Operator	No. 31 and 100 10001		10. Pool name or Wildcat	
200 N. Loraine, Ste. 800 4. Well Location	Midland, IX 79701	RECEIVED	Eunice Monument: Grayburg-San A	nares
Unit Letter:	1980 feet from the So	ruth line and	1980 feet from the East	_line
Section 11	Township 215	Range 36E	NMPM County Lea	<u>a</u>
	11. Elevation (Show whether	r DR, RKB, RT, GR, et 553' GL	c.)	
12. Check A	ppropriate Box to Indicate		Report, or Other Data	
NOTICE OF INT	ENTION TO	1 0110	OF OUT DEPORT OF	
NOTICE OF INT	ENTION TO:		SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🗌	REMEDIAL WORK	ALTERING CASI	1G □
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	ING OPNS. P AND A	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT J	ов П	
DOWNHOLE COMMINGLE				
OTHER:		OTHER: Bradenhe	ad / MIT	x
			ve pertinent dates, including estimated dan wellbore diagram of proposed completion	
•	d 10m / Duadaulaad	h 33	ab and 6 and about 1	
03/21/2013: XTO Energy ra	n a good MIT / Bradenhead	test on well. Char	rt and form attached.	
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Spud Date:	Rig Rele	ase Date:		
I hereby certify that the information	above is true and complete to th	e best of my knowledg	e and belief.	
SIGNATURE ATLANAL	Pabadue TI	TLE Requiato	ry Analyst DATE 03/21/2	013
Type or print name <u>Stephanie Rab</u>	padue F-r	stephanie_rabadue@		6714
For State Use Only	7 / .	/	/ / /	
APPROVED BY	TI TI	TIE DRT	MCZ	7012
Conditions of Approval (it any):	11		APR 2.3 20	~/~>
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