

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

|  |  |   |
|--|--|---|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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.)  |  | WELL API NO.<br><b>30-025-01548</b> ✓   |
| 1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>   |  | 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 2. Name of Operator<br><b>CROSS TIMBERS ENERGY, LLC</b>  |  | 6. State Oil & Gas Lease No.<br><b>312471</b>   |
| 3. Address of Operator<br><b>400 WEST 7th STREET, FORT WORTH, TX 76102</b>   |  | 7. Lease Name or Unit Agreement Name<br><b>SOUTHEAST MALJAMAR GSAU</b>                              |
| 4. Well Location<br>Unit Letter <b>O</b> : <b>660</b> feet from the <b>S</b> line and <b>1980</b> feet from the <b>E</b> line<br>Section <b>29</b> Township <b>17S</b> Range <b>33E</b> NMPM County <b>LEA</b> |  | 8. Well Number <b>701</b>   |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.)   |  | 9. OGRID Number <b>298299</b>   |
|  |  | 10. Pool name or Wildcat<br><b>MALJAMAR; GRAYBURG-SAN ANDRES</b>                                    |
|  |  | 4058 GR   |

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 ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

MIT TEST: 4/15/2014  
390 #; 35 MIN.  
CHART ATTACHED

Spud Date:

11/15/1943

Rig Release Date:

03/11/1944

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Robbie A. Grigg TITLE REGULATORY COMPLIANCE DATE 04/24/2014

Type or print name ROBBIE A GRIGG E-mail address: rgrigg@mspartners.com PHONE: 817-334-7842  
**For State Use Only**

APPROVED BY: Bill Savannah TITLE Staff Manager DATE 4-25-14  
Conditions of Approval (if any):

FOR RECORD ONLY MAY 07 2014

