Submit 1 Copy To Appropriate Distri Office	State of the W. IV.			Form C	
<u>District I</u> – (575) 393-6161 Energy, Minerals and Natural Resource 1625 N. French Dr., Hobbs, NM 8824040BBS OCD			WELL API NO.	Revised July 18,	2013
<u>District II</u> – (575) 748-1283	OIL CONSERVATIO	N DIVISION	<u> </u>		
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178	MAY 22 20141220 South St. Fra	ancis Dr.	5. Indicate Type of STATE	of Lease FEE	
1000 Rio Brazos Rd., Aztec, NM 874 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 8	37505	6. State Oil & Ga		
1220 S. St. Francis Dr., Santa Fe, NM 87505	RECEIVED		312507		
SUNDRY 1	NOTICES AND REPORTS ON WELL		7. Lease Name or	Unit Agreement Na	me
	ROPOSALS TO DRILL OR TO DEEPEN OR P PPLICATION FOR PERMIT" (FORM C-101)		BRIDGES STA	ATE	
1. Type of Well: Oil Well	Gas Well 🗌 Other	ı		506	
2. Name of Operator CROSS TIMBERS EN	RGY LLC	•	9. OGRID Numb	^{er} 298299	
3. Address of Operator		-	10. Pool name or	Wildcat	
	T, FORT WORTH, TX 76102	•	VACUUM;MIDDL	E PENN	
4. Well Location Unit Letter	830 feet from the SOUT	H line and 2	2175feet from	m the WEST	line
Section 13		Range 34E	NMPM	County LEA	
	11. Elevation (Show whether D	R, RKB, RT, GR, etc	402	1 GR	
12. Che	ck Appropriate Box to Indicate	Nature of Notice,	, Report or Other	Data	
	FINTENTION TO:		SEQUENT REI		_
PERFORM REMEDIAL WORF	C☐ PLUG AND ABANDON ☐ ☐ CHANGE PLANS ☐	REMEDIAL WOR		ALTERING CASING P AND A	i 📙
PULL OR ALTER CASING	☐ MULTIPLE COMPL ☐	CASING/CEMEN		I AND A	
DOWNHOLE COMMINGLE					
CLOSED-LOOP SYSTEM OTHER:		OTHER:		MIT	
13. Describe proposed or o	completed operations. (Clearly state al				
of starting any proposed proposed completion of	d work). SEE RULE 19.15.7.14 NMA r recompletion.	C. For Multiple Co	ompletions: Attach w	ellbore diagram of	
REQUEST EXTENSION. RECOMPLETION OPPORTUNITY IS BEING EVALUATED IN THIS WELLBORE.					
11110 11222501				1	
MIT TEST: 5/13/	2014		. of Ternnorary	1-1-12016	\leq
MIT TEST: 5/13/2014 START 540# - END 540#; 35 MIN. CHART ATTACHED This Approval of Temporary Abandonment Expires 1 VEAR					
CHART ATTAC	HED	Abandonme	SUL EXPIRO	ILAR	
				, your	
04/40/4000		00/00/400			
Spud Date: 01/10/1986	Rig Release I	Date: 03/03/198	36 		
I hereby certify that the information	tion above is true and complete to the	best of my knowledg	ge and belief.		
	00.				
SIGNATURE John City TITLE REGULATORY COMPLIANCE DATE 05/19/2014					
Type or print name ROBBIE A GRIGG E-mail address: rgrigg@mspartners.com PHONE: 817-334-7842 For State Use Only 1					
APPROVED BY: Maley Stawn FITLE Dist. Supervisor Date 5/22/2014					
Conditions of Approval (if any): MAY 2 7 2014 / OCC					
••	V		BARV 6	7 2011 Ko	P" //
			MAT	SI 2017 /W	9CD

