Submit 3 Copies To Appropriate District State of New Mexic Office Energy, Minerals and Natural	
District I 1625 N. French Dr., Hobbs, NM 87240	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION D	IVISION <u>30-025-04302</u>
District III 1220 South St. Franci	
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 8750 District IV	
1220 S. St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR F DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) F PROPOSALS.)	LUG BACK TO A Evening Moment South Thit B
1. Type of Well: Oil Well Gas Well Other Injection	8. Well Number
2. Name of Operator	918 9. OGRID Number
× XTO Energy, Inc.	005380
3. Address of Operator	10. Pool name or Wildcat
200 N. Loraine, Ste. 800 Midland, Texas 79701	
4. Well Location	
Unit Letter <u>M</u> : 660 feet from the South	line and 660 feet from the West line
Section 23 Township 205 Rat	NAC SCE NMPM County Les
Section 23 Township 20S Range 36E NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
11. Devation (Show whether DR, RAD, RT, OR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
12. Check Appropriate Box to indicate Nature of Notice, Report, of Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK 🔲 PLUG AND ABANDON 🗌 REMEDIAL WORK 🔲 ALTERING CASING 🗌	
TEMPORARILY ABANDON 🔲 CHANGE PLANS 🔲 CO	DMMENCE DRILLING OPNS. P AND A
PULL OR ALTER CASING D MULTIPLE COMPL C	ASING/CEMENT JOB
	HER: MIT/ Bradenbead X
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	
03/27/2014: XTO Energy ran a good MIT and Bradenhead test. Chart and form are attached.	
HOBBS OCD	
	JUL 01 2014
	RECEIVED
Spud Date: Rig Release	Date:
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
I hereby certify that the information above is the and complete to the be	a of my knowledge and benef.
SIGNATURE ALA MALL MAN TITLE Regulatory Analyst DATE 04/18/2014	
/ kendall chance@xtoenergy.com	
Type or print name Kendall Chance E-mail	address: PHONE _432-620-6749
For State Use Only	
APPROVED BY_ Diel Semamah TITLE Staff Manager DATE 7/2/2014	
Conditions of Approval (if any):	
	JUL Q 8 2014 4

