

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

WELL API NO. 30-025-31444
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 312471
7. Lease Name or Unit Agreement Name SEMGS AU
8. Well Number 906
9. OGRID Number 298299
10. Pool name or Wildcat MALJAMAR; GB/SA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4061 KB

SUNDRY NOTICES AND REPORTS ON WELLS
(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 PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator
CROSS TIMBERS ENERGY, LLC

3. Address of Operator
400 WEST 7th STREET, FORT WORTH, TX 76102

4. Well Location
Unit Letter **A** : **1200** feet from the **N** line and **950** feet from the **E** line
Section **32** Township **17S** Range **33E** NMMP County **LEA**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4061 KB

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: MIT <input checked="" type="checkbox"/>	

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:
CHART ATTACHED
CONVERTED PRODUCING WELL TO INJECTION WELL
NOTIFIED OCD- NO WITNESS

E-PERMITTING
P&A NR _____ P&A R _____
INT to P&A _____
CSNG _____ CHG Loc _____
TA _____ CHG TYPE **dr**

DO NOT START INJ.
TILL WFX ORDER IS
APPROVED. **WMS**

WFX-927

PK. 4228
T. Ref 4270

Spud Date: **12/17/1979**

Rig Release Date: **12/26/1979**

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

SIGNATURE **Laura Stone** TITLE **REGULATORY COMPLIANCE** DATE **7/23/14**

Type or print name **LAURA STONE** E-mail address: **rgrigg@mspartners.com** PHONE: **817-334-7842**

For State Use Only
APPROVED BY: **Mary Brown** TITLE **Dist Supervisor** DATE **7/29/2014**

Conditions of Approval (if any):

AUG 05 2014

jm

