| Submit 3 Copies To Appropriate District  | State of New Mexico                                     |                       |                                  | Form C-103              |
|--|---|-----------------------|----------------------------------|-------------------------|
| Office District I  | Energy, Minerals and Natural Resources                  |                       | WELL LEIN                        | June 19, 2008           |
| 1625 N. French Dr., Hobbs, NM 87240<br>District_II   | OH CONGERNATION PROVINCE                                |                       | WELL API NO.<br>30-025-41863     |                         |
| 1301 W. Grand Ave., Artesia, NM 88210  | OIL CONSERVATION DIVISION                               |                       | 5. Indicate Type of Lease        |                         |
| District III<br>1000 Rio Brazos Rd., Aztec, NM 87410   | 1220 South St. Francis Dres OCD Santa Fe, NM 8750 30 CD |                       | STATE 🗷                          | FEE 🗆                   |
| District IV  | Santa Pe, Nivi 6/50.                                    | Arn -                 | 6. State Oil & Gas Lea           |                         |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>87505   |   | SEP 1 8 2014          | o, state on & das Lea            | se no.                  |
|  | CES AND REPORTS ON WELLS                                | 761                   | 7. Lease Name or Unit            | Agreement Name:         |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK FOR PLUG  |   |                       | Perla Verde 31 Sta               | _                       |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUGERITOR PROPOSALS.)   |   |                       |                                  | _                       |
| 1. Type of Well:   |   |                       | 8. Well Number                   |                         |
| Oil Well X Gas Well Other  |   |                       | 004н                             |                         |
| 2. Name of Operator  |   |                       | 9. OGRID Number                  |                         |
| XTO Energy, Inc.   |   |                       | 005380                           |                         |
| 3. Address of Operator 200 N. Loraine, Ste. 800 Midland, TX 79701  |   |                       | 10. Pool name or Wild            | i                       |
| 4. Well Location   |   |                       | wc-025 g-08 s203500              | b); Boile Spring        |
|  | 170   |                       |                                  | _                       |
| Unit LetterP:  | 170 feet from the South                                 | line and              | feet from the                    | Eline                   |
| Section 31   | Township 198 Ran  | ge <b>35E</b>         | NMPM C                           | ounty <b>Lea</b>        |
| TAMES OF THE PARTY | 11. Elevation (Show whether DR,                         |                       |                                  |                         |
|  | 3700  | <u> </u>              |                                  |                         |
| 12. Check A  | ppropriate Box to Indicate Nati                         | ure of Notice. R      | Report, or Other Data            | a                       |
|  | • •   | ,                     | ,                                |                         |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:  |   |                       |                                  |                         |
|  |   |                       |                                  |                         |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING   |   |                       |                                  |                         |
| EMPORARILY ABANDON 🔲 CHANGE PLANS 😨 COMMENCE DRILLIN   |   |                       | NG OPNS. 🔲 P                     | AND A                   |
| PULL OR ALTER CASING   | MULTIPLE COMPL   CA                                     | DB 🗆                  | •                                |                         |
| DOWNHOLE COMMINGLE   |   |                       |                                  |                         |
|  |   |                       |                                  |                         |
| OTHER: Update SHL  | □ от  | HER:                  |                                  |                         |
| 13. Describe proposed or complete  | d operations. (Clearly state all pertine                | ent details, and give | e pertinent dates, includ        | ing estimated date      |
|  | SEE RULE 1103. For Multiple Cor                         |                       |                                  |                         |
| or recompletion.   |   |                       |                                  | •                       |
| XTO Energy, Inc respectfu  | lly requests a change of SHL t                          | o the submitted       | d C-101 and original             | plat from:              |
|  | 9S-35E to 170 FSL & 700 FEL,                            |                       |                                  |                         |
| to protect lizard habitat  | •   |                       |                                  |                         |
| The second of the second   |   |                       |                                  |                         |
| Updated Plat is Atached  | •   |                       | E-PERMITTING  P&A NR  INT to P&A | P&AR_                   |
|  |   |                       | E-PERMITI"                       | VA VA                   |
|  |   |                       | P&A NR                           | - Chng Loc_             |
|  |   |                       | INT to Far                       |                         |
| Spud Date:   | Rig Release D   | Pate:                 | C2140_                           |                         |
|  |   |                       | TA                               |                         |
| I hereby certify that the information  | above is true and complete to the best                  | t of my knowledge     | and belief.                      |                         |
| SIGNATURE STANDY ON I  | Patradul TITLE  | Regulator             | y Analyst DA                     | TE 09/10/2014           |
| SIGNATURE CONTRACTOR   | ster  | hanie rabadue@        | <i>D</i> ,,                      | 1 D                     |
| Type or print name _Stephanie Rab  | adue E-mail a   | ddress:               |                                  | ONE <u>432-620-6714</u> |
|  |   |                       |                                  | / .                     |
| For State Use Only   | Jans  | Petroleum             | Engineer                         | 09/19/14                |
| APPROVED BY(if any):   | TITLE   |                       | DAT                              | E                       |
| Conditions of Approval (if any):   |   |                       |                                  |                         |