

District I - (575) 393-6161
District II - (575) 748-1283
District III - (505) 334-6178
District IV - (505) 476-3460

MAR 20 2015

Energy, Minerals and Natural Resources

Revised July 18, 2013

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-24006
5. Indicate Type of Lease STATE [X] FEE []
6. State Oil & Gas Lease No. 312479
7. Lease Name or Unit Agreement Name NORTH VAC. ABO UNIT
8. Well Number 172
9. OGRID Number 298299
10. Pool name or Wildcat NORTH VAC-ABO
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4057 GR

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 SUCH PROPOSALS.)
1. Type of Well: Oil Well [] Gas Well [X] 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 P : 660 feet from the S line and 660 feet from the E line
Section 03 Township 17-S Range 34-E NMPM County LEA

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: [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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

5 YR. MIT TEST 3/11/15
(START PRESSURE 363, END PRESSURE 360)
CHART ATTACHED

Spud Date: 3/20/1972

Rig Release Date: 4/18/1972

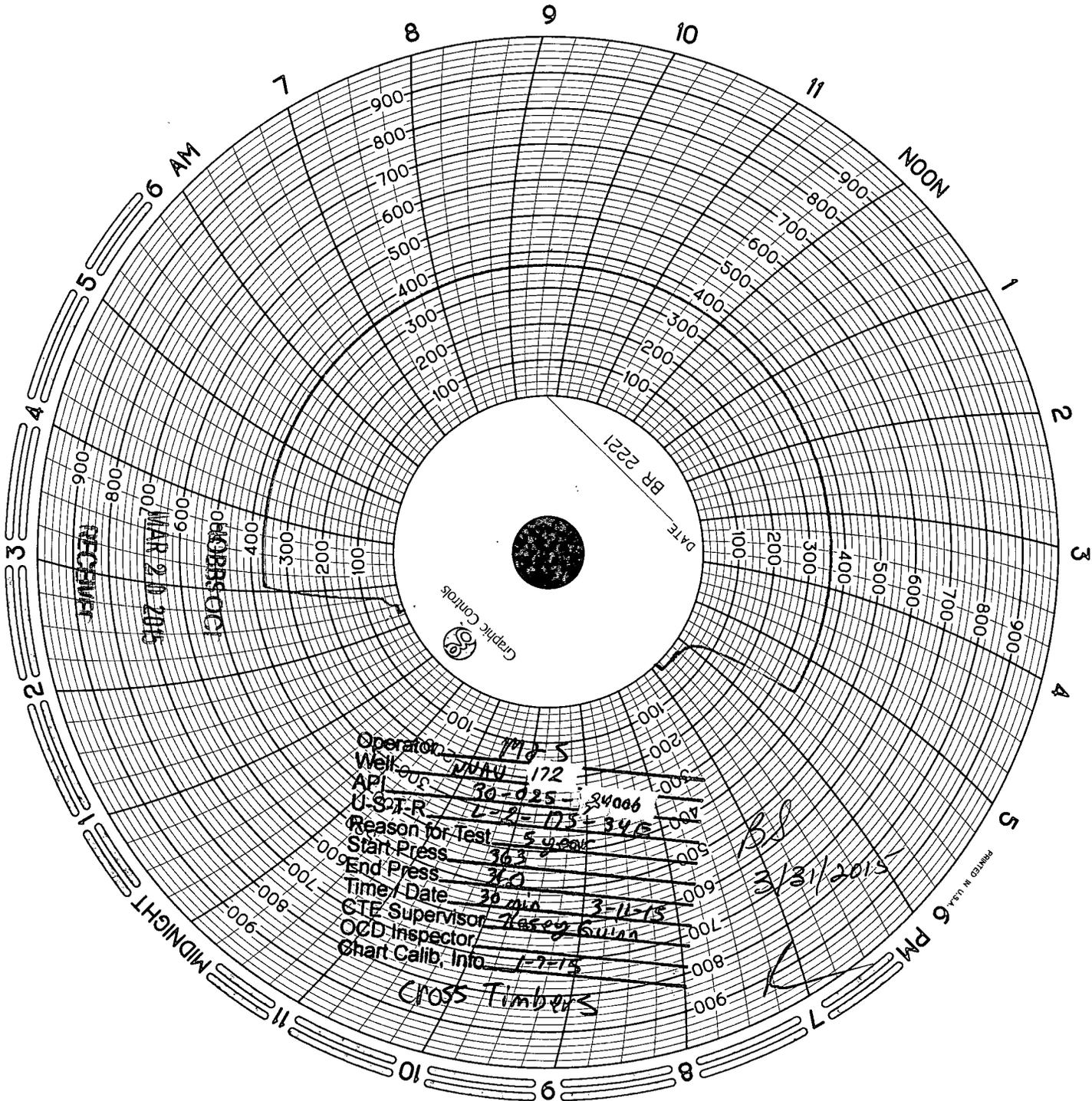
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Laura Stone TITLE Regulatory Compliance DATE 3/18/2015

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

APPROVED BY: [Signature] TITLE COMPLIANCE OFFICER DATE
Conditions of Approval (if any):

APR 02 2015 [Signature]



DATE BR 2221



Operator MD S
 Well WAV 172
 API 30-025-24006
 U-S-I-R L-2-173-345
 Reason for Test 5 year
 Start Press 363
 End Press 360
 Time/Date 30 min 3-11-15
 CTE Supervisor Laszlo Guljan
 OGD Inspector MD S
 Chart Calib. Info 1-7-13

CROSS Timbers

MD S
 3/11/2015

MADE IN U.S.A. BY IN. 0210004

RECEIVED
 MAR 20 2015
 OGD