Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103		
District I – (575) 393-6161 Er 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.		
District II — (575) 748-1283	District II – (575) 748-1283 811 S. First St. Artesia, NM 88210.			30-025-24519	
District III - (505) 334-6178 MAR 20 (202) 1220 South St. Francis Dr.			5. Indicate Type of Lease  STATE FEE		
Santa Fe. NM 87505			6. State Oil & Gas L		
1220 S. St. Francis Dr., Santa Fe, NMRECEIVE;			312478		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name or Unit Agreement Name		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			NORTH VAC. ABO EAST UNIT  8. Well Number 10		
1. Type of Well: Oil Well Gas Well Other  2. Name of Operator				10	
CROSS TIMBERS ENERGY, LLC			9. OGRID Number	298299	
3. Address of Operator 400 WEST 7th STREET, FORT WORTH, TX 76102			10. Pool name or Wildcat NORTH VAC-ABO POOL		
4. Well Location Unit Letter L :2100	feet from the S	line and 800	feet from the	W he line	
Section 18 Township 17-S Range 35-E NMPM County LEA					
11. EI	evation (Show whether DR	RKB, RT, GR, etc.)	4006.0	GR.	
Transport & Assistant Control of Control and Control of					
12. Check Appropri	riate Box to Indicate N	ature of Notice,	Report or Other Da	ata	
NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:					
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  TEMPORARILY ABANDON  CHANGE PLANS  COMMENCE DRII				TERING CASING ☐ AND A ☐	
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JO				<del></del>	
DOWNHOLE COMMINGLE  CLOSED-LOOP SYSTEM					
OTHER:		OTHER:		×	
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 3/4/15					
(START PRESSURE 480, END PRESSURE 480)					
CHART ATTACHED					
J.					
0/00/4072	D: D   D	14/6/1072		]	
Spud Date: 9/28/1973	Rig Release Da	ite: 11/6/1973			
I hereby certify that the information above is	true and complete to the be	est of my knowledge	and belief.	·	
Y					
SIGNATURE Jama STOW 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: Bill Sonan	nah TITLE	St. CC m	DATE	3/3/12015	
APPROVED BY: Bell Somanah TITLE Staff Manager DATE 3/31/2015 Conditions of Approval (if any):					
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		AP	R 0 2 2015	M	

