Submit 1 Copy To Appropriate District	State of New M		•	Form C-103
District I	Energy, Minerals and Nat	ural Resources	Cumi Caraca	Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II	OH GOMODEN ===		WELL API NO. 30-02	5-08890
1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION		5. Indicate Type of L	ease	
District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505		STATE X	FEE 🖂	
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa i e, ivivi	07505	6. State Oil & Gas Le	ease No.
87505				
	S AND REPORTS ON WE		7. Lease Name or Un	
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICAT			Arrowhead Graybur	g Unit
PROPOSALS.)		HOBBS OCD	0 11 11 1	
1. Type of Well: Oil Well 🔼 Ga	as Well Other	5 5 	8. Well Number #206	
2. Name of Operator XTO Energy, Inc.		JUL 0 9 2015	9. OGRID Number 005380	
3. Address of Operator 500 W. Illinois St Ste 100 Midlar	nd, TX 79701	RECEIVED	10. Pool name or Wil Arrowhead; Graybu	
4. Well Location		h gins & mil v		
Unit Letter L	2310' feet from the South	h line and	330' feet from the	he_Westline
Section 12	-	U		ounty Lea
	1. Elevation (Show whether	DR, RKB, RT, GR, etc	c.)	
12. Check App	ropriate Box to Indicate	Nature of Notice, I	Report, or Other Da	ta
•				
NOTICE OF INTEN	ITION TO:	SUB	SEQUENT REPO	RT OF:
PERFORM REMEDIAL WORK F	PLUG AND ABANDON 🔲	REMEDIAL WORK	X /	ALTERING CASING
TEMPORARILY ABANDON 🗍 C	CHANGE PLANS	COMMENCE DRILLI	MG OPNS. □ I	P AND A
_	MULTIPLE COMPL	CASING/CEMENT JO		
DOWNHOLE COMMINGLE			,	
<u> </u>				
CLOSED-LOOP SYSTEM OTHER:	[]	OTHER: Becomple	4:	
13. Describe proposed or completed op		OTHER: Recomple		X
of starting any proposed work). SE proposed completion or recompleti 05/27/2015: MIRU PU. Tag @ 3590'. DO 05/28/2015: Set pkr @ 3615', test TCA 05/29/2015: Pump 100sx Thixotropic 06/01-06/02/2015: DO/CO to 3775'. 06/03/2015: Acidize perfs fr/3685'-377 06/08/2015: RIH w/tbg & ESP. RWTP.	EE RULE 19.15.7.14 NMAC ion. O CIBP. A to 500psi. Good test, no le cmt & 100sx CI C. WOC 4 h	For Multiple Comple eaks. RIH w/CICR. nrs. Pump 300sx CI C.		
A closed -loop system was used to p	erform this operation.			
Spud Date: 03/05/09	Rig Rele	ase Date:		
I hereby certify that the information abo	ove is true and complete to the	e best of my knowledg	e and belief.	
SIGNATURE AT AM	Rapholue m	TLE_Regulatory Analy	r st DA	ATE 06/18/2015
Type or print name Stephanie Rabadu		mail address:		HONE 432.620.6714
For State Use Only		tephanie_rabadue@xt _{TUE} Petroleum En	icrimeen?	0-1 11
APPROVED BY	TI	TLE Penoieum Ca	DAT	TE 07/24/15
Conditions of Approval (if any):				

JUL 27 2015

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