| Submit 2 Copies 10 Appropriate District | State of New Mexico | | Form C-1U3 May 27, 2004 | |
|---|---|----------------|--|-----------------------------|
| District I 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | |
| District II | etrict II | | 30-025-34824 | |
| 1301 W. Grand Ave., Artesia, NM 88210 District III | rand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION 1220 South St. Francis Dr. | | 5. Indicate Type of Lease | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV | Santa Fe, NM 87410 | | STATE X FEE | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | 23000 | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name or Unit Agreement Name | |
| (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 | | | Eunice Monument South Unit | |
| PROPOSALS.) 1. Type of Well: Oil Well x Gas Well Other | | | 8. Well Number 575 | |
| 2. Name of Operator | | | 9. OGRID Number 5380 | |
| XTO ENERGY INC. 3. Address of Operator | | | 10. Pool name or Wildcat | |
| 200 LORAINE STE 800 MIDLAND, TX 79701 | | | Eunice Monument; Greyburg-San Andres | |
| 4. Well Location | | | | |
| Unit Letter N: 100 feet from the SOUTH line and 1338 feet from the WEST line | | | | |
| Section 31 | Township 20S Ran | | Not assess a manufacture and second and seco | ounty LEA |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | |
| Pit or Below-grade Tank Application or Closure | | | | |
| Pit typeDepth to Groundwa | terDistance from nearest fresh w | ater well Dist | ance from nearest surface wat | er |
| Pit Liner Thickness: mil | Below-Grade Tank: Volume | bbls; Co | nstruction Material | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | |
| NOTICE OF IN | TENTION TO: | SUR | SEQUENT REPOR | T OF: |
| NOTICE OF INTENTION TO: SUB | | | | |
| TEMPORARILY ABANDON | | | | |
| PULL OR ALTER CASING | PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ CASING/CEMENT JOB ☐ | | | |
| OTHER: X Reactivation Procedure 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion | | | | |
| or recompletion. | | | | |
| • | | | | |
| PROCEDURE TO REACT: | IV E | | | |
| MIRU, NDWH, NUBOP DO TO CIBP @3860', DO CIBP/CMT TO 3900', CO, POH PERF 3886-92, 3 SPF, 120 DEG PHASING ACD W/2400 GALS 15% 90/10 HCL MAX PRESS – 800 PSI SWB POOH W/PKR RIH W/PROD EQPT NDBOP, NUWH, RDMO WELL ON PROD | | | | |
| DO TO CIBP @3860', DO CIBP/CMT TO 3900', CO, POH | | | | |
| PERF 3886-92, 3 SPF, 120 DEG PHASING ACD W/2400 GALS 15% 90/10 HCL MAX PRESS – 800 PSI | | | | |
| SWB | 00/10 HCL MAX PRESS = 800 P | 81 | DEC DEC | 200E |
| POOH W/PKR | | | E Moca | 2005 25 Pived 25 bs N |
| RIH W/PROD EQPT | | | 12 Hob | be 60 |
| NDBOP, NUWH, RDMO | | | \and oct | |
| WELL ON PROD | | | 150 | A 65 |
| | | | 15340 | 16060 |
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| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan. | | | | |
| SIGNATURE MALYST DATE 11/18/2005 | | | | |
| Type or print name M. LYN MARR E-mail address: Lyn Marr@xtoenergy.com Telephone No. 432-620-6714 | | | | |
| For State Use Only | | | | DEC 2 1 2005 |
| | 1 1. VA | KEPRESENTATIVE | II/STAFF MANAGER | |
| APPROVED BY: X augustum TITLE DATE Conditions of Approval (if ady): | | | | |