

Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM  
87505State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-35461
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 23000
7. Lease Name or Unit Agreement Name Eunice Monument South Unit
8. Well Number 560
9. OGRID Number 5380
10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres
4. Well Location Unit Letter <u>O</u> : <u>1290</u> feet from the <u>SOUTH</u> line and <u>1370</u> feet from the <u>EAST</u> line Section <u>36</u> Township <u>20S</u> Range <u>36E</u> NMPM County <u>LEA</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 ☐ Other2. Name of Operator  
XTO ENERGY INC.3. Address of Operator  
200 LORAIN STE 800 MIDLAND, TX 797014. Well Location  
Unit Letter O : 1290 feet from the SOUTH line and 1370 feet from the EAST line  
Section 36 Township 20S Range 36E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

## 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 ☐

OTHER: ☐

## SUBSEQUENT REPORT OF:

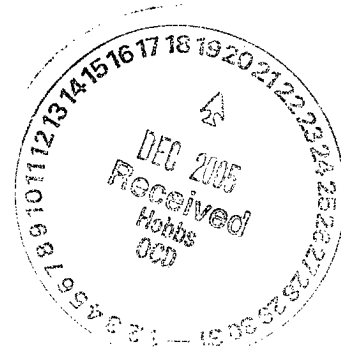
REMEDIAL WORK ☐ ALTERING CASING ☐  
 COMMENCE DRILLING OPNS. ☐ P AND A ☐  
 CASING/CEMENT JOB ☐

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 PERF/ACD

MIRU, NDWH, NUBOP, RIH CO FILL, POH  
 RIH W/CICR 3700' TST CSG TO 500#  
 SQZ PERFS (PER CMT CO RECOMMENDATION)  
 RIH CO CICR, CMT TO 3864', TST SQZ TO 500 PSI, C/O TO 4015'. CIRC CLN, POH  
 PERF 3872-76, 3902-08, 3918-28, 3950-54, 3962-66, 3972-76, 3996-4000, 4008-12  
 ACD W/2400 GALS 15% 90/10 ACD MAX PSI = 800  
 SWB  
 RIH W/PROD EQPT  
 NDBOP, NUWH, RDMO  
 RTN TO PROD

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 M. Lyn Marr TITLE REGULATORY ANALYST DATE 11/18/2005Type or print name M. LYN MARR E-mail address: Lyn\_Marr@xtoenergy.com Telephone No. 432-620-6714

For State Use Only

APPROVED BY: Lyn W. Marr TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE DEC 21 2005

Conditions of Approval (if any):