

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

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

WELL API NO. 30-025-29675
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 312507
7. Lease Name or Unit Agreement Name BRIDGES STATE
8. Well Number 511
9. OGRID Number 298299
10. Pool name or Wildcat SWD; SAN ANDRES
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4011 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 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 **O** : **474** feet from the **S** line and **1904** feet from the **E** line
 Section **23** Township **17S** Range **34-E** NMPM County **LEA**

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

E-PERMITTING <SWD <u>INJECTION</u> > CONVERSION _____ RBDMS <u>BS</u> <input type="checkbox"/> RETURN TO _____ TA <u>TA</u> <input type="checkbox"/> CSNG _____ ENVIRO _____ CHG LOC _____ <input type="checkbox"/> INT TO PA _____ P&A NR _____ P&A R _____ <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <u>TA EXT</u> <input checked="" type="checkbox"/>
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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.

3/3/2016
 5 YR. MIT TEST TA Ext
 (START PRESSURE 620, END PRESSURE 620)
 CHART ATTACHED
 (PASSED)

This Approval of Temporary Abandonment Expires 3/3/2017

Spud Date: 7/24/1986

Rig Release Date: 8/2/1986

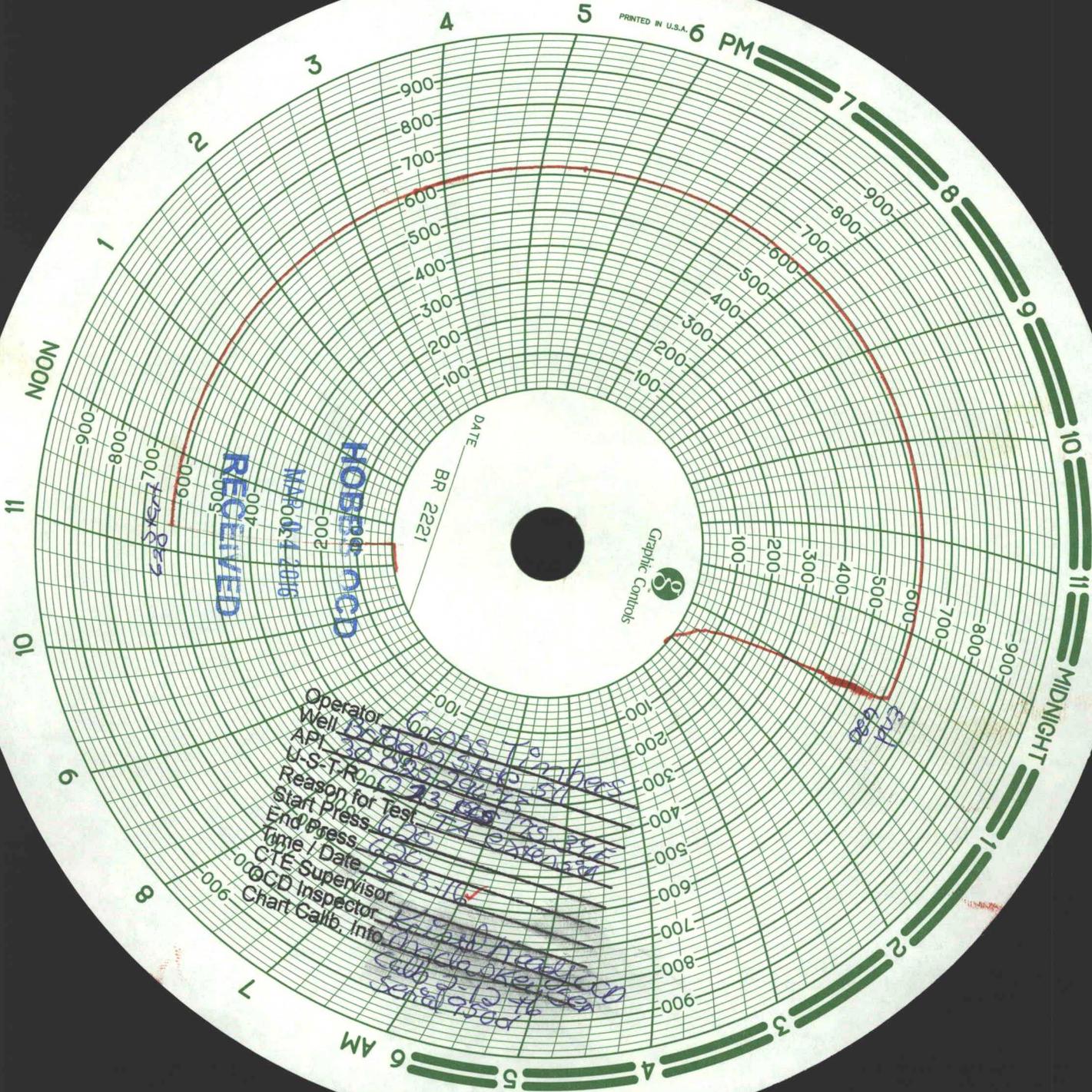
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Laura Stone TITLE Regulatory Compliance DATE 3/3/2016

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

APPROVED BY: Bill Samawah TITLE Staff Manager DATE 3/10/16
 Conditions of Approval (if any):

MAR 15 2016



DATE
BR 2221



HOBERG CD
 MAILED 4/20/16
RECEIVED

Operator Onassis
 Well 30-01-01-10
 API 30-01-01-10
 U-S-T-R 013-29175
 Reason for Test 2074 extension
 Start Press 620
 End Press 620
 Time / Date 3-3-16
 CTE Supervisor [Signature]
 CD Inspector [Signature]
 Chart Calib. Info [Signature]

NOON

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MIDNIGHT

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