

Submit 1 Copy To Appropriate District 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 87505

**HOBBS OCD**  
**JUN 16 2016**  
**RECEIVED**

State of New Mexico  
 Energy, Minerals and Natural Resources  
**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

WELL API NO. <b>30-025-25878</b> ✓	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> ✓	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name: <b>Arrowhead Grayburg Unit</b> ✓	
8. Well Number <b>233</b> ✓	
9. OGRID Number <b>005380</b> ✓	
10. Pool name or Wildcat <b>Arrowhead; Grayburg</b> ✓	
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <b>Injection</b> ✓	
2. Name of Operator <b>XTO Energy, Inc.</b>	
3. Address of Operator <b>500 W. Illinois St Ste 100 Midland, TX 79701</b>	
4. Well Location Unit Letter <b>K</b> : <b>2310</b> feet from the <b>South</b> line and <b>1880</b> feet from the <b>West</b> line Section <b>18</b> Township <b>22S</b> Range <b>37E</b> NMPM County <b>Lea</b> ✓	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <b>MIT / Bradenhead</b> <input checked="" type="checkbox"/>	

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.

**05/16/2016: XTO Energy, Inc ran a goot MIT and bradenhead test. MIT witnessed by Carl Flowers. Copy of chart and form are attached.**

Spud Date:

Rig Release Date:

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

SIGNATURE Stephanie Rabadue TITLE Regulatory Analyst DATE 06/09/2016

Type or print name Stephanie Rabadue E-mail address: stephanie\_rabadue@xtoenergy.com PHONE 432-620-6714

**For State Use Only**  
 APPROVED BY Mark W. Pritchard TITLE P.E.S. DATE 6/20/2016

Conditions of Approval (if any):

*mw*

HOBBS OCD

JUN 16 2016

RECEIVED

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name XTO Energy, Inc	API Number 30-025-25878
Property Name Arrowhead Grayburg Unit	Well No. 233

7. Surface Location

UL - Lot K	Section 18	Township 22S	Range 37E	Feet from 2310	N/S Line South	Feet From 1880	E/W Line West	County Lea
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Well Status

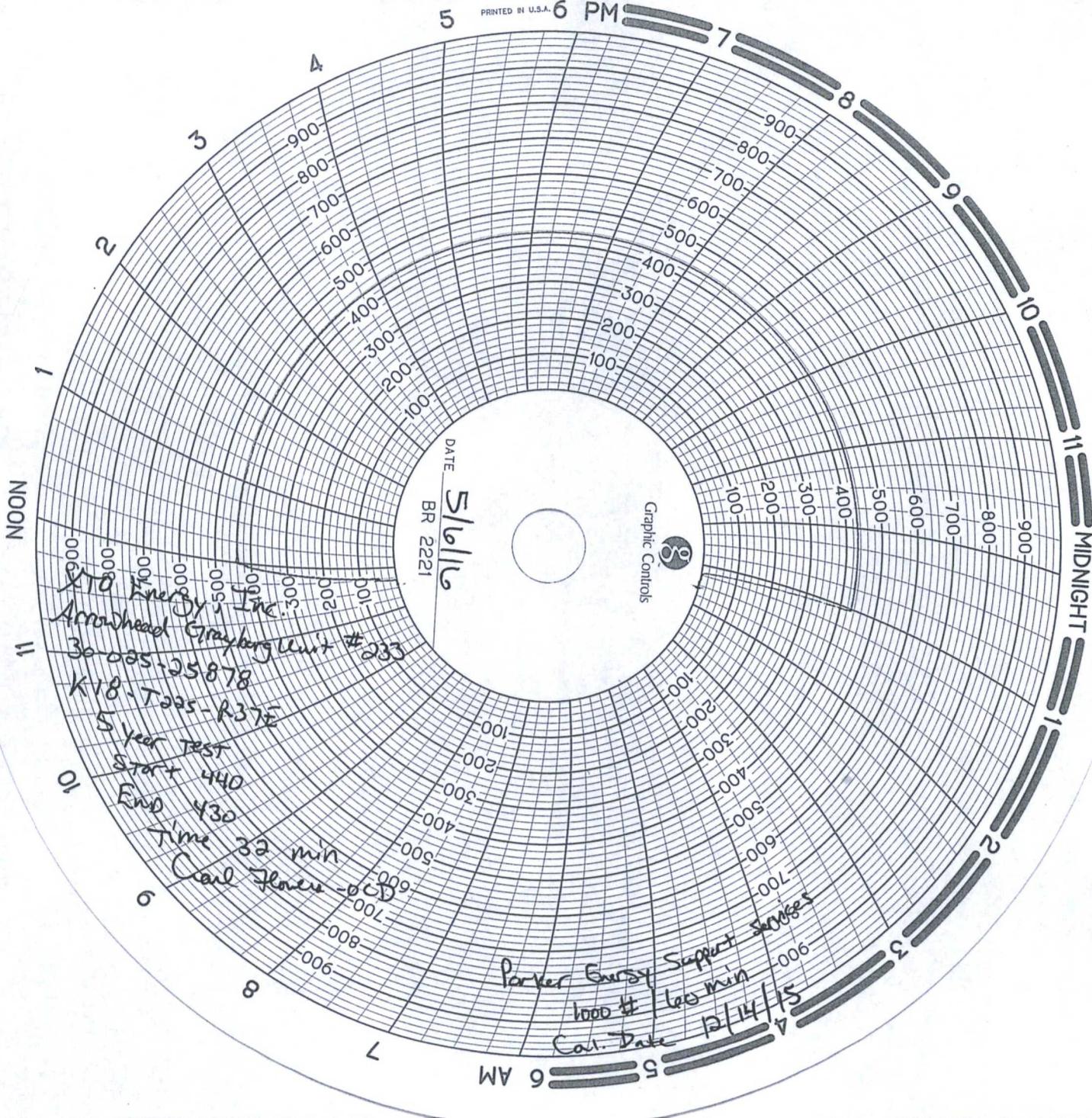
TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR <u>INJ</u>	SWD	PRODUCER OIL	GAS	DATE 5-6-2016
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure	Ø			Ø	730
<b>Flow Characteristics</b>					
Puff	Y/N	Y/N	Y/N	Y/N	CO2 <input type="checkbox"/>
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR <input checked="" type="checkbox"/>
Surges	Y/N	Y/N	Y/N	Y/N	GAS <input type="checkbox"/>
Down to nothing	Y/N	Y/N	Y/N	Y/N	Type of Fluid
Gas or Oil	Y/N	Y/N	Y/N	Y/N	Injected for
Water	Y/N	Y/N	Y/N	Y/N	Waterflood if applies

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>Alan Miller - XTO Energy</i>	OIL CONSERVATION DIVISION
Printed name:	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: 5-16-2016	Phone: 575-441-1641
Witness:	



XTO Energy Inc.  
 Arrowhead Grayberg Unit # 233  
 30-035-25878  
 K18-T225-R37E  
 5 year test  
 Start 440  
 End 430  
 Time 32 min  
 Carl Flores - OGD

Parker Energy Support Services  
 load # low min  
 Cal. Date 12/14/15