

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
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

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
June 19, 2008

**HOBBS OGD**  
**MAY 19 2016**  
**RECEIVED**

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

WELL API NO. <b>30-025-32868</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <b>SDE 31 Federal</b>
8. Well Number <b>9</b>
9. OGRID Number <b>005380</b>
10. Pool name or Wildcat <b>Triste Draw; Delaware, West</b>
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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <b>Disposal</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>J</b> : <b>1980</b> feet from the <b>South</b> line and <b>1980</b> feet from the <b>East</b> line Section <b>31</b> Township <b>23S</b> Range <b>32E</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:

- PERFORM REMEDIAL WORK
- TEMPORARILY ABANDON
- PULL OR ALTER CASING
- DOWNHOLE COMMINGLE
- PLUG AND ABANDON
- CHANGE PLANS
- MULTIPLE COMPL

OTHER:

SUBSEQUENT REPORT OF:

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

OTHER: **MIT/Braedenhead**

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.

XTO Energy, Inc ran a good MIT and Bradenhead test on the above referenced well.

Chart and form are attached.

**BHT - Accepted for Record Only**

**MIT - DENIED**  
**10% DECLINE**  
**Compliance Letter written 5/23/16.**

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 05/06/2016  
Type or print name Stephanie Rabadue E-mail address: stephanie\_rabadue@xtoenergy.com PHONE 432-620-6714

For State Use Only

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

**Accepted for Record Only**

**MJB/OGD**  
**5/23/2016**

MAY 11 2016

**HOBBS OCD**

MAY 19 2016

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

**BRADENHEAD TEST REPORT**

RECEIVED	Operator Name XTO Energy, Inc	* API Number 30-025-32868
	Property Name SDE 31 Federal	Well No. 009

<sup>7</sup> Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
J	31	23S	32E	1980	South	1980	East	Lea

Well Status

TA'D WELL YES	<input checked="" type="radio"/> NO	SHUT-IN YES	<input checked="" type="radio"/> NO	INJ	<input checked="" type="radio"/> SWD	PRODUCER OIL	GAS	DATE 5-6-16
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OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csng	(E) Tubing
Pressure	0	0	0	0	995
<u>Flow Characteristics</u>					
Puff	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	CO2 ___
Steady Flow	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	WTR ___
Surges	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	GAS ___
Down to nothing	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	Type of Fluid Injected for Waterflood if applies.
Gas or Oil	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	
Water	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	<input checked="" type="radio"/> Y / <input checked="" type="radio"/> N	

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

Surface had a Puff and then down to Nothing

Signature: <i>Arthur Jackson</i>	OIL CONSERVATION DIVISION
Printed name: <i>Arthur JACKSON</i>	Entered into RBDMS
Title: <i>Production Foreman</i>	Re-test
E-mail Address: <i>bo-jackson@XTOEnergy.COM</i>	
Date: <i>5-6-16</i>	Phone: <i>575-441-1887</i>
Witness:	



