

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1281  
 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. <b>30-025-23462</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. <b>312479</b>
7. Lease Name or Unit Agreement Name <b>NORTH VAC. ABO</b>
8. Well Number <b>136</b>
9. OGRID Number <b>298299</b>
10. Pool name or Wildcat <b>NORTH VAC-ABO</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>4034 GL</b>

**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 **ITS**

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 **D** : **660** feet from the **N** line and **860** feet from the **W** line  
 Section **26** Township **17-S** Range **34E** NMPM County **LEA**

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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>UIC</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.

**3/6/2017**  
**5 YR. MIT TEST**  
**(START PRESSURE 360, END PRESSURE 360)**  
**CHART ATTACHED**  
**(PASSED)**

Spud Date: **4/20/1970**

Rig Release Date: **5/22/1970**

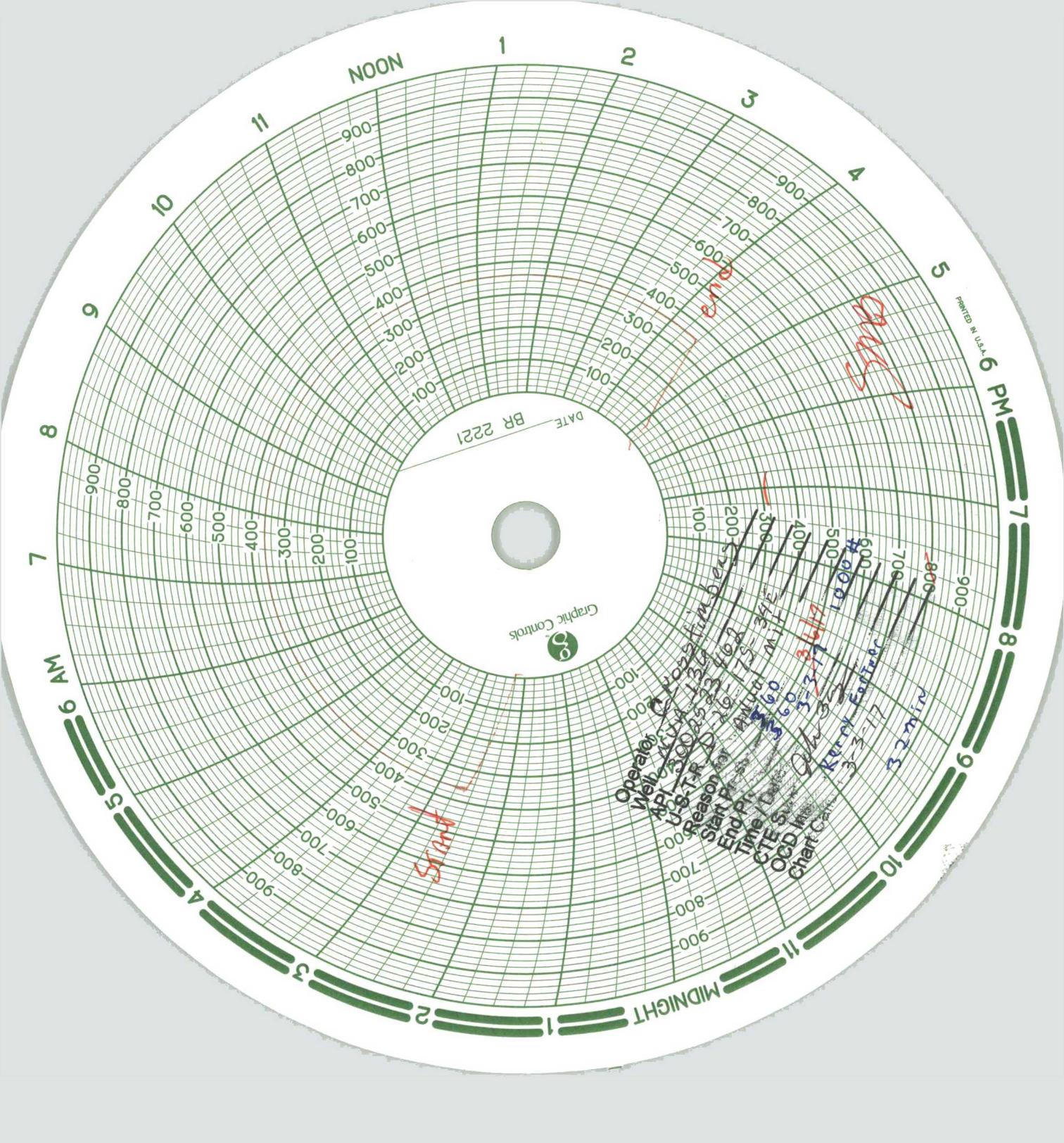
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE **Laura Stone** TITLE **Regulatory Compliance** DATE **3/6/2017**

Type or print name **LAURA STONE** E-mail address: **cblaylock@mspartner.com** PHONE: **817-334-7882**

**For State Use Only**

APPROVED BY: **[Signature]** TITLE **Compliance Officer** DATE **3/2/17**  
 Conditions of Approval (if any):



PRINTED IN U.S.A.

DATE BR 2221

Graphic Controls

Starts

Ends

Ends

Operator: ~~Charles~~  
 Well: ~~1111~~  
 U.S.T.R.: ~~1111~~  
 Reason: ~~1111~~  
 Start P.: ~~1111~~  
 End P.: ~~1111~~  
 Time / Day: ~~1111~~  
 C.T.E. S.: ~~1111~~  
 O.C.D. #: ~~1111~~  
 Chart Cal.: ~~1111~~

6 AM

6 PM

7

8

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11

MIDNIGHT

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

Operator Name Cross Timber Energy, LLC	<sup>3</sup> API Number 3002523462
Property Name North Vacuum ABO Unit	Well No. 136

**7. Surface Location**

UL - Lot D	Section 26	Township 17S	Range 34E	Feet from 660	N/S Line FNL	Feet From 860	E/W Line FWL	County Lea
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**Well Status**

Well Status <i>Active</i>	SHUT-IN <i>NO</i>	PRODUCING	DATE <i>3-2-17</i>	<i>Injector</i>
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OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

**OBSERVED DATA**

**If bradenhead flowed water, check all of the descriptions that apply:**

	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod Csng	(E)Tubing
Pressure	<i>N/A</i>	<i>0</i>	<i>N/A</i>	<i>12"</i>	<i>4050</i>
<b>Flow Characteristics</b>					
Puff	Y / N	Y / <input checked="" type="radio"/> N	Y / N	<input checked="" type="radio"/> Y / N	
Steady Flow	Y / N	Y / <input checked="" type="radio"/> N	Y / N	Y / <input checked="" type="radio"/> N	
Surges	Y / N	Y / <input checked="" type="radio"/> N	Y / N	Y / <input checked="" type="radio"/> N	
Down to nothing	Y / N	Y / <input checked="" type="radio"/> N	Y / N	Y / <input checked="" type="radio"/> N	
Gas or Oil	Y / N	Y / <input checked="" type="radio"/> N	Y / N	Y / <input checked="" type="radio"/> N	
Water	Y / N	Y / <input checked="" type="radio"/> N	Y / N	Y / <input checked="" type="radio"/> N	

**If bradenhead flowed water, check all of the descriptions that apply:**

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks: INJECTING AT THIS TIME \_\_\_ WTR, \_\_\_ GAS, \_\_\_ CO2

**HOBBS OCD**  
 MAR 07 2017  
**RECEIVED**

Signature: <i>Jake Baeza</i>	OIL CONSERVATION DIVISION
Printed name: <i>Jake Baeza</i>	Entered into RBDMS
Title: <i>Lease Operator</i>	Re-test <i>JMB</i>
E-mail Address: <i>jbaeza@ctfieldsvcs.com</i>	
Date: <i>3-2-17</i>	Phone: <i>575-513-8134</i>
Witness: <i>Kerry Fortner-Kortner-OCD</i>	

*575-399-3221*