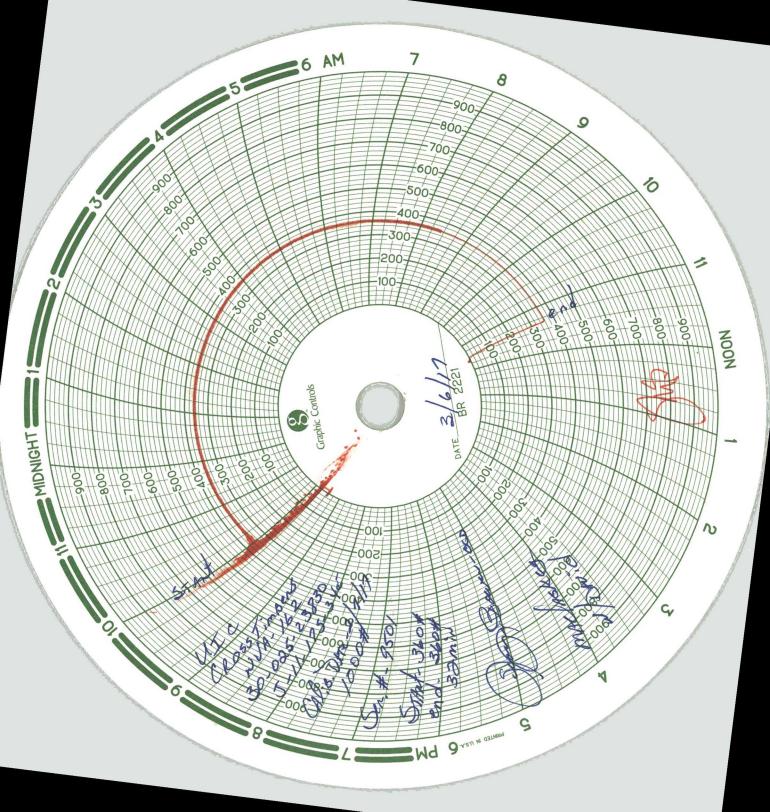
Submit 1 Copy Office	opy To Appropriate District State of New Mexico			Form C-103							
District I – (57 1625 N. Frenc	5) 393-616BBS OCD n Di., Hoobs, NM 88240	Energy, Minerals and Natu	iral Resources	Revised July 18, 2013 WELL API NO.							
D' II (6		30-025-23830									
	os Rd., Aztec, NM 87410	5. Indicate Type of Lease STATE FEE									
District IV - (	505) 476-3460 ncis Dr. Santa Fe, NM	6. State Oil & Gas Lease No.									
87505		312479  7. Lease Name or Unit Agreement Name									
	E THIS FORM FOR PROPOSALS	S AND REPORTS ON WELLS S TO DRILL OR TO DEEPEN OR PL	UG BACK TO A	NORTH VAC. ABO							
PROPOSALS.	_	ON FOR PERMIT" (FORM C-101) F	OR SUCH								
1. Type of 2. Name of		Well Other	5	0. OCRID Marshar	$\dashv$						
<b>CROSS</b>	TIMBERS ENERGY,	LLC		298299							
3. Address		T WORTH, TX 76102		10. Pool name or Wildcat NORTH VAC-ABO							
4. Well Lo	ation 1 198	so s	,,, 218	30 F	$\dashv$						
	it Letter:	feet from the	line and	leet from the							
11 Elevation (Chow whather DR RKR RT GR etc.)											
				4040.5 GL							
	12. Check App	ropriate Box to Indicate N	ature of Notice.	Report or Other Data							
		•									
PERFORM	NOTICE OF INTE REMEDIAL WORK ☐ PI	NTION TO: LUG AND ABANDON □	REMEDIAL WORK	SEQUENT REPORT OF: K □ ALTERING CASING □							
	RILY ABANDON C	HANGE PLANS	COMMENCE DRII	LLING OPNS. P AND A	i						
	LTER CASING	ULTIPLE COMPL	CASING/CEMENT	TJOB							
	OOP SYSTEM										
OTHER:			OTHER:	use x	_						
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											
	R. MIT TEST										
(S	TART PRESSURE 30	60, END PRESSURE 3	60)								
CHART ATTACHED											
(P/	ASSED)										
Spud Date:	7/29/1971	Rig Release Da	te: 8/25/1971								
I hereby certi	fy that the information above	re is true and complete to the b	est of my knowledge	and belief	_						
Thereby certi	) C	) .	ost of my knowledge	s and series.							
SIGNATURI	Lama S	TITLE Regu	latory Compliar	DATE 3/6/2017							
Type or print name LAURA STONE E-mail address: cblaylock@mspartners.c PHONE: 817-334-788											
For State Use Only											
APPROVED BY: Jane TITLE omplime of DATE 3/1/17 Conditions of Approval (if any):											
Conditions of	Approval (II ally).	· ·									



## **State of New Mexico**

## Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office BRADENHEAD TEST REPORT

	Operator N Cross Timber I	<sup>3</sup> API Number 30-025-23830											
	Pro North	Well No. 162				-							
		7. Surface Loca	ation										
/ -	wnship Range 17S 34E	Feet from 1980			From 180	E/W Line FEL	County Lea	7					
Well Status													
Well Status SHUT-IN PRODUCING DATE													
ACTIVE	NO		3/6/2017										
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-	(C)Interm-Prod		rod Csng	(E)Tubing						
Pressure	0	0				0	4300	-					
Flow Characteristics													
Puff	Y / (10)	Y / 🚳	Y /	Y / N		(10							
Steady Flow	Y / (5)	Y / 🖎		Y / N		(10)							
Surges	Y / (N)	Y / (N)		Y / N Y / N		(							
Down to nothing  Gas or Oil		Y / 🔊		Y / N Y / N		(10)							
Water	Y / Ø	Y /(R)		Y / N		/ (N)							
If bradenhead flowed water, check all of the descriptions that apply:													
CLEAR	FRESH	SALTY		SULFUR		BLACK							
								_					
Remarks:			INJECTING A				GAS,CO2						
		HOBBS OCD  MAR 0 7 2017											
		MAR 0 7 2017											
1													
$\bigcap$								_					
Signature:	OIL CONSERVATION DIVISION												
Printed name: Sak	Baca	Entered into RBDMS											
Title: Lease	Operato	Re-test A											
E-mail Address: Jbap	za Octi	/ XM											
Date: 3/6/2017	( ) \												
, /	Witness:												