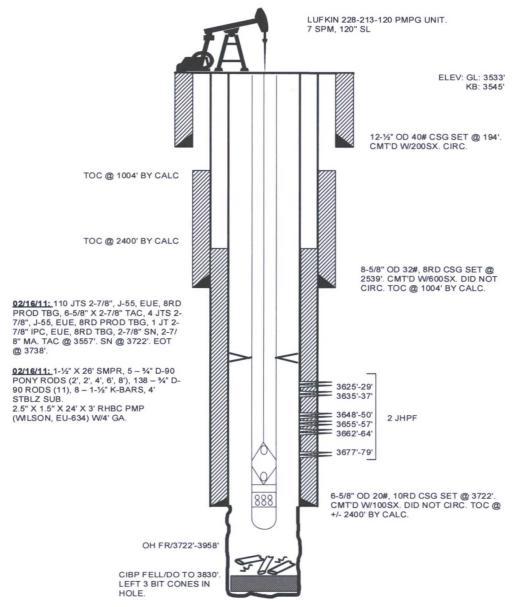
Submit 1 Copy To Appropriate District	State of New Me			Form C-103
Office District I	Energy, Minerals and Natural Resources		Revised July 18, 2013 WELL API NO.	
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONSERVATION DIVISION		30-025-06284	
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr. Santa Fe, NM 87505		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 8	87505	STATE X 6. State Oil & Gas Lease	FEE
1220 S. St. Francis Dr., Santa Fe, NM 87505		3 0 2017	o. State Off & Gas Lease	140.
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit A	greement Name:
(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.)			Eunice Monument Sout	th Unit
1. Type of Well: Oil Well Gas Well Other			8. Well Number	,
2. Name of Operator XTO Energy, Inc.			9. OGRID Number 005380	
3. Address of Operator 500 W. Illinois St Ste 100 Midland, Texas 79701			10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres	
4. Well Location				
Unit Letter E :	1980 feet from the North	line and	600 feet from the	West line
Section 30	Township 20S R	ange 37E	NMPM Count	y Lea /
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
12 (1 1 4	T. D. A. T. D. A. T.	NI CNI C	0.1 D	
12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data				
NOTICE OF INTENTION TO:			SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			ALT	ERING CASING
TEMPORARILY ABANDON X	CHANGE PLANS	COMMENCE DRILLI	NG OPNS. PA	ND A
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT JO	OB	
DOWNHOLE COMMINGLE		4		
CLOSED-LOOP SYSTEM				
OTHER:		OTHER:		
 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. XTO Energy, Inc respectfully requests to temporarily abandon the referenced location for 5-years with the following procedure: Set CIBP @ 3622 w/25sx thru tbg or 35 via wireline. WOC 4 hours. Tag. 				
2. Run good MIT.				
A closed-loop system will be used for this operation.				
OCD Hobbs office 24 hours				
		prior of runni	ing MIT Test & Char	rt
a 15	n: n:	B. [
Spud Date:	Rig Relea	ase Date:		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Stepred Rabadus TITLE Regulatory Analyst DATE 05/20/2017				
Type or print name Stephanie Rabadue E-mail address: PHONE 432-620-6714				
For State Use Only				
APPROVED BY Conditions of Approval (if any): DATE 5/30/2017				

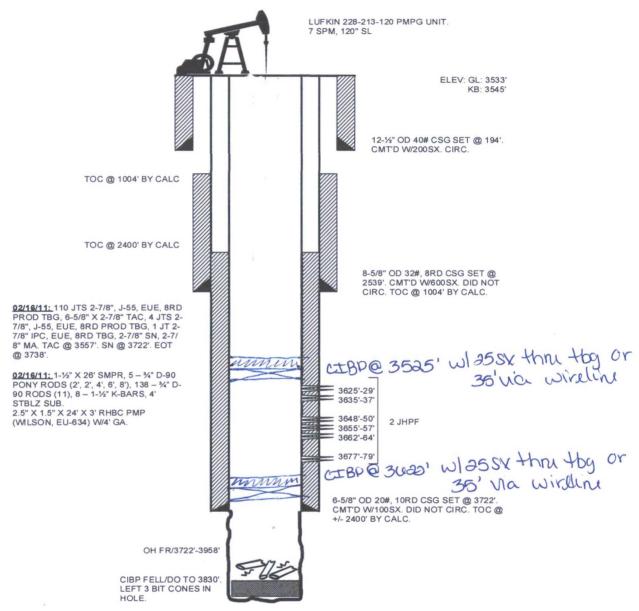
Eunice Monument 110 30-025-06284



TD: 3958'

proposeci

Eunice Monument 110 30-025-06284



TD: 3958