

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6177
 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. 30-025-23565
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 312479
7. Lease Name or Unit Agreement Name NORTH VAC. ABO UNIT
8. Well Number 143
9. OGRID Number 298299
10. Pool name or Wildcat NORTH VAC ABO

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

2. Name of Operator
CROSS TIMBERS ENERGY, LLC

3. Address of Operator
400 W 7TH ST, FORT WORTH, TX 76102

4. Well Location
 Unit Letter B : 660 feet from the N line and 1780 feet from the E line
 Section 27 Township 17S Range 34E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4041 KB

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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: <input 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.

1. POOH w/ Open Ended Tbg
2. Attempt to Clear Csg Obstruction with Csg Swage
3. Test Csg String
4. RIH w/ new SA
5. Latch into Perm Pkr, Perform MIT, RWTI

**Condition of Approval: notify
 OCD Hobbs office 24 hours
 prior of running MIT Test & Chart**

C.O.A
 Please provide well bore diagram with subsequent
 C-103
 MRS.

Spud Date: 08/31/1970

Rig Release Date: 09/21/1970

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

SIGNATURE Connie Blaylock TITLE REGULATORY TECH DATE 07/17/2017

Type or print name CONNIE BLAYLOCK E-mail address: cblaylock@mspartner.com PHONE: 817-334-7882

For State Use Only
 APPROVED BY: Mary Brown TITLE AO/II DATE 7/18/2017
 Conditions of Approval (if any):