

Submit 1 Copy To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 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
 Geological Minerals and Natural Resources
HOBBS OCD
JUL 26 2017
RECEIVED
 CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised July 18, 2013

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.)		WELL API NO. 30-025-04662
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator XTO Energy, Inc.		6. State Oil & Gas Lease No.
3. Address of Operator 500 W. ILLINOIS, SUITE 100		7. Lease Name or Unit Agreement Name: Eunice Monument South Unit
4. Well Location Unit Letter B : 660 feet from the NORTH line and 1980 feet from the EAST line Section 16 Township 21S Range 36E NMPM County LEA		8. Well Number 362
		9. OGRID Number 005380
		10. Pool name or Wildcat Monument; Grayburg-San Andres
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:		SUBSEQUENT REPORT OF:	
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: MIT <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.

XTO Energy respectfully requests the following pursuant to a failed annual MIT:

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

1. POOH w/tbg & pkr.
2. Reset pkr.
3. Run good MIT.

If it is found that casing integrity issues are the cause of the failure, a follow-up C-103 NOI will be provided to NMOCD and the district office worked with.

A closed-loop system will be used for this operation. 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 Lindsay Deaver TITLE Regulatory Analyst DATE 7/12/2017

Type or print name Lindsay Deaver E-mail address: lindsay_deaver@xtoenergy.com PHONE 432-221-7307

For State Use Only
 APPROVED BY Mary Brown TITLE AO/II DATE 7/26/2017
 Conditions of Approval (if any):

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

MAY 11 2017

BRADENHEAD TEST REPORT

Operator Name XTO Energy, Inc	API Number 30-025-04662
Property Name Eunice Monument South Unit	Well No. 362

JUL 26 2017
 RECEIVED

7. Surface Location

UL - Lot B	Section 16	Township 21S	Range 36E	Feet from 660	N/S Line North	Feet From 1980	E/W Line East	County Lea
---------------	---------------	-----------------	--------------	------------------	-------------------	-------------------	------------------	---------------

Well Status

TA'D WELL YES	NO	SHUT-IN YES	NO	INJECTOR <input checked="" type="radio"/> INJ	SWD	PRODUCER OIL	GAS	DATE 5-3-2017
------------------	----	----------------	----	--	-----	-----------------	-----	------------------

OBSERVED DATA

	(A) Surface	(B) Interm(1)	(C) Interm(2)	(D) Prod Csg	(E) Tubing
Pressure					
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	Y / N	CO2 ___
Steady Flow	Y / N	Y / N	Y / N	Y / N	WTR ___
Surges	Y / N	Y / N	Y / N	Y / N	GAS ___
Down to nothing	Y / N	Y / N	Y / N	Y / N	Type of Fluid
Gas or Oil	Y / N	Y / N	Y / N	Y / N	Injected for
Water	Y / N	Y / N	Y / N	Y / N	Waterflood if
					applies

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

*Water coming out of surface valve after pumping
 in 50 BBLs.*

FAILED

Signature: <i>Alan Miller - XTO</i>	OIL CONSERVATION DIVISION
Printed name: <i>ALAN MILLER</i>	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: <i>5-3-2017</i>	Phone: <i>575-441-1641</i>
Witness:	