

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
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

HOBBS OCD
RECEIVED
 06/30/2017

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. 30-025-10359
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 St Ste 100 Midland, TX 79701		7. Lease Name or Unit Agreement Name: Arrowhead Grayburg Unit
4. Well Location Unit Letter B : 660' feet from the North line and 1980 feet from the East line Section 19 Township 22S Range 37E NMPM County Lea		8. Well Number 245
		9. OGRID Number 005380
		10. Pool name or Wildcat Arrowhead; Grayburg
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"/>	REMEDIAL WORK <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
MULTIPLE COMPL. <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>	
CLOSED-LOOP SYSTEM <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	OTHER: T/A STATUS <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.

- 06/28/2017: MIRU. POOH w/equip.
- 06/29/2017: Set CIBP @ 3550' w/25sx cmt. WOC. Tag. Test to 500psi. Good test.
- 06/30/2017: Test w/NMOC Kerry Fortner as witness. Good test. Chart attached.

This Approval of Temporary Abandonment Expires 6/30/2021

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 Stephanie Rabadue TITLE Regulatory Analyst DATE 07.06.2017
 Type or print name Stephanie Rabadue E-mail address: stephanie_rabadue@xtoenergy.com PHONE 432-620-6714
For State Use Only
 APPROVED BY Mary Brown TITLE AO/II DATE 8/1/2017

RBDMS-CHART - ✓

