Submit 1 Copy Office	To Appropriate District	State	of New Me	exico		Form C-103
District I - (57		Energy, Miner	als and Natu	ral Resources		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240					WELL API N	
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210					30-025-237 5. Indicate T	
					STATI	
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 <b>FEB 19 2018</b> Santa Fe, NM 87505						& Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM						
87505 RECEIVED SUNDRY NOTICES AND REPORTS ON WELLS					312479	ne or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A					7. Lease Naii	he of Onit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH					NORTH VA	CUUM ABO UNIT
PROPOSALS.)  1. Type of Well: Oil Well Gas Well X Other INJECTION					8. Well Number 201	
2. Name of Operator					9. OGRID Number	
CROSS TIMBERS ENERGY, LLC					298299	
3. Address of Operator 400 W 7TH ST, FORT WORTH, TX 76102					10. Pool name or Wildcat VACUUM, ABO NORTH	
4. Well Location					VACUUM,	ABO NORTH
Unit Letter J: 1980 feet from the S line and 1980 feet from the E line						
Section 10 Township 17-S Range 34-E NMPM County LEA						
11. Elevation (Show whether DR, RKB, RT, GR, etc.)						
4060 DF						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data						
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK						☐ ALTERING CASING ☐
TEMPORARILY ABANDON					_	
PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB						
DOWNHOLE COMMINGLE						
	OOP SYSTEM					
OTHER:		ted enemations (Cla		OTHER:	d .:	deter in alluding actions and data
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.						
proposed compression						
	APPROX FEBRUARY	21, 2018				
		,	Con	dition of Appr	oval notify	
MIRU, pull and scan tog					-	
	Repair tbg and SA as necessary OCD Hobbs office				e 24 hours	
	RIH and latch onto pkr					a wife
	Test TCA		prior	i i duning ivii i	Test or Ch	art
Circulate Pkr Fluid						ŧ
	Run MIT Witnessed by RWTI	ОСБ				
	KW II					
Caud Datas		D.	tig Release Da	ata.		
Spud Date:	03/11/1971	K	ig Release Da	06/05/19	71	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.						
r nervoj veranj ana ano intermation aco ve is and comprete to the best of my knowledge and benefit.						
(1. 7/-1.0						
SIGNATURE Chy un 184 10 CL TITLE REGULATORY TECH DATE 02/16/2018						
Type or print name CONNIE BLAYLOCK E-mail address: cblaylock@mspartners.com PHONE: 817-334-7882						
For State Use Only						
ADDROVED	DV. YIL AND Y	MANIM -	TTIE A	0111_		DATE 2/10/2019
APPROVED BY: DATE DATE DATE DATE DATE						

