

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) 334-6178
 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. 30-025-24262
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NORTH VACUUM ABO EAST UNIT
8. Well Number 009
9. OGRID Number 298299
10. Pool name or Wildcat VACUUM; ABO, NORTH

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 INJ

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 J : 1980 feet from the SOUTH line and 1980 feet from the EAST line
 Section 18 Township 17S Range 35E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
4006 GL

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: <u>UIC</u> <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.

02/26/2018
 5 YR MIT TEST
 START PRESSURE 420, END PRESSURE 420
 PASSED - CHART ATTACHED

Spud Date: 3/17/1975 Rig Release Date: 3/27/1975

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 02/26/2018

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

For State Use Only

APPROVED BY: [Signature] TITLE Compliance Officer DATE 3/19/18

Conditions of Approval (if any):



Graphic Controls

DATE BR 2221

Start

10:00

End

11:00

Operator Chris Adams
Well 2451400 #9
API 30-025-09212
U-S-T-R 5-10-175-350
Reason for Test 4200
Start Press 4200
End Press 4200
Time / Date 3/09/18
CTE Supervisor [Signature]
OCD Inspector [Signature]
Chart Calib. Info 3/23/18 1000

PRINTED IN U.S.A. 6 PM

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

HOBBS OCD

MAR 19 2018

RECEIVED

Operator Name Cross Timber Energy, LLC	API Number 3002524262
Property Name North Vacuum ABO East Unit	Well No. 9

Surface Location

UL - Lot 1	Section 18	Township 17S	Range 35E	Feet from 1980	N/S Line FSL	Feet From 1980	E/W Line FEL	County Lea
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Well Status

Well Status	SHUT-IN NO	PRODUCING	DATE 2-26-18	Inj
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OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

If bradenhead flowed water, check all of the descriptions that apply:

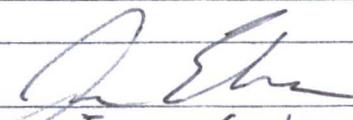
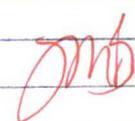
	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod Csgng	(E)Tubing
Pressure	0	0	✓	0	4175
Flow Characteristics					
Puff	Y / N	Y / N	Y / N	Y / N	
Steady Flow	Y / N	Y / N	Y / N	Y / N	
Surges	Y / N	Y / N	Y / N	Y / N	
Down to nothing	Y / N	Y / N	Y / N	Y / N	
Gas or Oil	Y / N	Y / N	Y / N	Y / N	
Water	Y / N	Y / N	Y / N	Y / N	

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks:

INJECTING AT THIS TIME WTR, GAS, CO2

Signature: 	OIL CONSERVATION DIVISION
Printed name: James Embree	Entered into RBDMS
Title: Lease Operator	Re-test
E-mail Address: Tembree@ctfieldsuvs.com	
Date: 2-26-18	
Phone: (575) 704-2241	
Witness: 