

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 OGD  
JUL 16 2018  
RECEIVED

WELL API NO.	30-025-04520
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:	Eunice Monument South Unit
8. Well Number	251
9. OGRID Number	005380
10. Pool name or Wildcat	Eunice Monument; Grayburg-San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3585' GL

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> INS	7. Lease Name or Unit Agreement Name: Eunice Monument South Unit
2. Name of Operator XTO Energy, Inc.	8. Well Number 251
3. Address of Operator 6401 Holiday Hill rd., Bldg 5	9. OGRID Number 005380
4. Well Location Unit Letter N : 660 feet from the South line and 1980 feet from the West line Section 6 Township 21S Range 36E NMPM County Lea	10. Pool name or Wildcat Eunice Monument; Grayburg-San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3585' GL	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: MIT / Bradenhead ☒

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.

7/11/2018: XTO Energy ran a good MIT & Bradenhead test. Chart and form are attached.

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 7/11/2018

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

For State Use Only

APPROVED BY [Signature] TITLE Compliance Officer DATE 7/17/18

Conditions of Approval (if any):

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

**BRADENHEAD TEST REPORT**

Operator Name <b>XTO</b>		API Number <b>30-025-04520</b>	
Property Name <b>Eunice monument South</b>		Well No. <b>251</b>	

**7. Surface Location**

UL - Lot <b>N</b>	Section <b>6</b>	Township <b>21S</b>	Range <b>36E</b>	Feet from <b>660</b>	N/S Line <b>S</b>	Feet From <b>1980</b>	E/W Line <b>N</b>	County <b>LCA</b>
----------------------	---------------------	------------------------	---------------------	-------------------------	----------------------	--------------------------	----------------------	----------------------

**Well Status**

TA'D WELL YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>	SHUT-IN YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/>	INJECTOR <b>INJ</b>	SWD	OIL	PRODUCER	GAS	DATE <b>6/14/18</b>
---------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------	------------------------	-----	-----	----------	-----	------------------------

**OBSERVED DATA**

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csing	(E)Tubing
Pressure	<b>0</b>	<b>—</b>	<b>—</b>	<b>0</b>	<b>600</b>
Flow Characteristics					
Puff	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	CO2 <input type="checkbox"/>
Steady Flow	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	WTR <input type="checkbox"/>
Surges	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	GAS <input type="checkbox"/>
Down to nothing	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Type of Fluid
Gas or Oil	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	Injected for
Water	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	<b>Y/N</b>	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.

**HOBBS OCD**

**JUL 16 2018**

**RECEIVED**

Signature:		OIL CONSERVATION DIVISION	
Printed Name: <b>Luis Cebalga XTO Energy</b>		Entered into RBDMS	
Title:		Re-test	
E-mail Address:			
Date: <b>6/14/18</b>	Phone:		
Witness:			

INSTRUCTIONS ON BACK OF THIS FORM

