

Submit 1 Copy To Appropriate District  
 Office  
 District I  
 1625 N. French Dr., Hobbs, NM 88240  
 District II  
 1301 W. Grand Ave., Artesia, NM 87206  
 District III  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV  
 1220 S. St. Francis Dr., Santa Fe, NM  
 87505

**HOBBS OGD**  
**JUL 16 2018**  
**RECEIVED**

State of New Mexico  
 Energy, Minerals and Natural Resources  
 CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised July 18, 2013

<b>WELL API NO. 30-025-04598</b>	
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name: <b>Eunice Monument South Unit</b>	
8. Well Number <b>275</b>	
9. OGRID Number <b>005380</b>	
10. Pool name or Wildcat <b>Eunice Monument; Grayburg-San Andres</b>	
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 type="checkbox"/> Other <input checked="" type="checkbox"/> <b>Injection Well</b>	
2. Name of Operator <b>XTO Energy, Inc.</b>	
3. Address of Operator <b>6401 Holiday Hill Rd., Bldg 5</b>	
4. Well Location  Unit Letter <b>B</b> : <b>660'</b> feet from the <b>North</b> line and <b>1980'</b> feet from the <b>East</b> line  <b>Section 10</b> Township <b>21S</b> Range <b>36E</b> NMPM County <b>Lea</b>	
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:**

- PERFORM REMEDIAL WORK
- TEMPORARILY ABANDON
- PULL OR ALTER CASING
- DOWNHOLE COMMINGLE
- CLOSED-LOOP SYSTEM
- OTHER:

- PLUG AND ABANDON
- CHANGE PLANS
- MULTIPLE COMPL

**SUBSEQUENT REPORT OF:**

- REMEDIAL WORK
- COMMENCE DRILLING OPNS.
- CASING/CEMENT JOB
- OTHER: **MIT / Bradenhead**

- ALTERING CASING
- P AND A

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.

**7/10/2018: XTO Energy ran a good MIT & Bradenhead. Good chart and form attached.**

Spud Date: 8/6/1936

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 7/10/2018

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

**For State Use Only**

APPROVED BY *Spencer* TITLE Compliance Officer Supervisor DATE 7/17/18

Conditions of Approval (if any):

JUL 16 2018

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

RECEIVED

BRADENHEAD TEST REPORT

Operator Name <i>XTO</i>		API Number <i>30-025-04598</i>
Property Name <i>Lunice monument South</i>		Well No. <i>275</i>

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
<i>2</i>	<i>10</i>	<i>21S</i>	<i>36E</i>	<i>660</i>	<i>N</i>	<i>1980</i>	<i>E</i>	<i>Lea</i>

Well Status

TA'D Well YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	SHUT-IN YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INJECTOR <input checked="" type="checkbox"/> SWD	PRODUCER OIL <input type="checkbox"/> GAS <input type="checkbox"/>	DATE <i>6/15/18</i>
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OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	$\phi$	—	—	$\phi$	<i>400</i>
Flow Characteristics					
Puff	Y/N <i>N</i>	Y/N	Y/N	Y/N <i>N</i>	CO2 _____
Steady Flow	Y/N <i>N</i>	Y/N	Y/N	Y/N <i>N</i>	WTR _____
Surges	Y/N <i>N</i>	Y/N	Y/N	Y/N <i>N</i>	GAS _____
Down to nothing	Y/N <i>N</i>	Y/N	Y/N	Y/N <i>N</i>	If applicable type
Gas or Oil	Y/N <i>N</i>	Y/N	Y/N	Y/N <i>N</i>	fluid injected for
Water	Y/N <i>N</i>	Y/N	Y/N	Y/N <i>N</i>	Waterflood

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

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Luis Cabello X20</i>	Entered into RBDMS
Title:	Re-test
E-mail Address:	<i>[Signature]</i>
Date: <i>6/15/18</i>	Phone:
Witness: <i>[Signature]</i>	

