

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 OOD
JUL 16 2018
RECEIVED

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 ☒	WELL API NO. 30-025-04198
2. Name of Operator XTO Energy, Inc.	5. Indicate Type of Lease STATE ☒ FEE ☐
3. Address of Operator 4301 Holiday Hill rd., Bldg 5	6. State Oil & Gas Lease No.
4. Well Location Unit Letter A : 660 feet from the North line and 330 feet from the East line Section 10 Township 20S Range 36E NMPM County Lea	7. Lease Name or Unit Agreement Name: Eunice Monument South Unit B
	8. Well Number 853
	9. OGRID Number 005380
	10. Pool name or Wildcat Monument; Grayburg-San Andres
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 ☐ 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 ☒

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:

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

George Bonar

TITLE

Compliance Officer Supervisor

DATE

7/17/18

Conditions of Approval (if any):

State of New Mexico
Energy, Minerals and Natural Resources Department JUL 16 2018
Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

RECEIVED

Operator Name <i>XTO</i>	API Number <i>30-0025-04128</i>
Property Name <i>Eunice monument South B</i>	Well No. <i>853</i>

7. Surface Location

UT. - Lot <i>A</i>	Section <i>10</i>	Township <i>20S</i>	Range <i>36E</i>	Feet from <i>660</i>	N/S Line <i>N</i>	Feet From <i>330</i>	E/W Line <i>E</i>	County <i>Lea</i>
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Well Status

TA'D WELL YES ☒ NO ☒	SHUT-IN YES ☒ NO ☒	INJECTOR INJ ☒ SWD ☐	PRODUCER OIL ☒ GAS ☐	DATE <i>6/11/18</i>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>φ</i>	<i>φ</i>	<i>—</i>	<i>φ</i>	<i>80</i>
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	CO2 ☐
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	WTR ☐
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	GAS ☐
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Type of Fluid
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	Injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	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.

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Luis Cabello XTO Energy</i>	Entered into RBDMS
Title:	Re-test
E-mail Address:	<i>[Signature]</i>
Date: <i>6/11/18</i>	
Phone:	
Witness: <i>[Signature]</i>	

INSTRUCTIONS ON BACK OF THIS FORM

