District   District	MELL API NO.   30-025-04560   30-0	MELL API NO.   30-025-04560   30-0		Engage, Minerals and Ma	Mexico		Form	
District II   130   W. Grand Ave, Artesia, NM 88210   1220 South Francis Dr. Santa Fr. NM 87005   STATE   FE   6. State Oil & Gas Lease No.   1220 South Francis Dr. Santa Fr. NM 87005   SUNDRY NOTICES AND REPORTS ON WELL (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.)   Type of Well: Oil Well   Gas Well   Other Injection Well   Season of Operator ATO Energy, Inc.   9. OGRID Number 005380   10. Pool name or Wildcat Eunice Monument; Grayburg-San Ar Well Location   11. Elevation (Show whether DR, RKB, RT, GR, etc.)   372' GL   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   CHANGE PLANS   COMMENCE DRILLING OPNS.   PAND A PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   OTHER: MIT / Bradenhead   OTH	District II	District II		Elicigy, witherais and Na	itural presources	WELL API	NO.	y 18
District III   1220 South of Francis Dr.   Santa Fe. NM 87505   STATE   FEE   6. State Oil & Gas Lease No.	1.220 South Francistor   1.220 South Francis	1.220 South Francistor   1.220 South Francis	District II	OIL CONSERVATA	SN DIVSKION		30-025-04560	
Sunday Notices and Reports on Well   State Oil & Gas Lease No.	Sunday Notices and Reports on Well   State Oil & Gas Lease No.	Sunday Notices and Reports on Well   State Oil & Gas Lease No.	1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South	rancis Pr.	5. Indicate		
1. Type of Well: Oil Well: Gas Well: Other Injection Well: 283 295 295     2. Name of Operator	1. Type of Well: Oil Well: Gas Well: Other Injection Well: 293 295     2. Name of Operator XTO Energy, Inc.	1. Type of Well: Oil Well: Gas Well: Other Injection Well: 293 295     2. Name of Operator XTO Energy, Inc.	1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa FONM	(8 <b>%30</b> 5 <b>)</b>	SIA		
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1. Type of Well: Oil Well   Gas Well   Other Injection Well   283 295     2. Name of Operator   9. OGRID Number   005380     3. Address of Operator   10. Pool name or Wildcat   Eunice Monument; Grayburg-San Ar     4. Well Location   Unit Letter   F   1980   feet from the   North   line and   198	1. Type of Well: Oil Well   Gas Well   Other Injection Well   283 295     295 295     296   OGRID Number   9. OGRID Nu	1. Type of Well: Oil Well   Gas Well   Other Injection Well   283 295     295 295     296   OGRID Number   9. OGRID Nu	(DO NOT USE THIS FORM FOR PROP DIFFERENT RESERVOIR. USE "APPLI PROPOSALS.)	OSALS TO DRILL OR TO DEEPE CATION FOR PERMIT" (FORM C	N OR PLUG BACK TO A 101) FOR SUCH	Eunice Mo	onument South Unit	
Address of Operator 6401 Holiday Hill Rd., Bldg 5  4. Well Location Unit Letter F : 1980 feet from the North line and 198.66 feet from the Section 8  Township 21S Range 36E NMPM County Lea  11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3572' GL  12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASIN TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A  PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB  OTHER:  OTHER:  OTHER: MIT / Bradenhead  Township 21S Range 36E NMPM County Lea  NMPM County Lea  County Lea  County Lea  OTHER: MIT / Bradenhead  OTHER: OTHER: OTHER REMEDIAL WORK ALTERING CASIN GRADING COMMENCE DRILLING OPNS. PAND A  OTHER: OTHER: OTHER REMEDIAL WORK ASING REMEDIAL WORK ASING REMEDIAL WORK ASING REMEDIAL WORK ASING REMEDIAL WORK ALTERING CASING REMEDIAL WORK ASING/CEMENT JOB  OTHER: OTHER RIT / Bradenhead	Address of Operator 6401 Holiday Hill Rd., Bldg 5  4. Well Location Unit Letter F : 1980 feet from the North line and 1986 feet from the Section 8  Township 21S Range 36E NMPM County Lea  11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3572' GL  12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON SUBSEQUENT REPORT OF:  PERFORM REMEDIAL WORK ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A  PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB  DOWNHOLE COMMINGLE  13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated dat of starting any proposed work). SEE RULE 19.15.7.14 NMAC For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	Address of Operator 6401 Holiday Hill Rd., Bldg 5  4. Well Location Unit Letter F : 1980 feet from the North line and 1986 feet from the Section 8  Township 21S Range 36E NMPM County Lea  11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3572' GL  12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON SUBSEQUENT REPORT OF:  PERFORM REMEDIAL WORK ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A  PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB  DOWNHOLE COMMINGLE  13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated dat of starting any proposed work). SEE RULE 19.15.7.14 NMAC For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.	1. Type of Well: Oil Well			293	295	•
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE  Type or print name  Lindsay Deaver  E-mail address:  PHONE 432-221-7  Lindsay_deaver@xtoenergy.com	I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE  Type or print name  Lindsay Deaver  E-mail address:  PHONE 432-221-7.  Indsay deaver@xtoenergy.com	I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE  Type or print name  Lindsay Deaver  E-mail address:  PHONE 432-221-7.  Indsay deaver@xtoenergy.com	DOWNHOLE COMMINGLE  CLOSED-LOOP SYSTEM  OTHER:  13. Describe proposed or complete of starting any proposed work) proposed completion or recomp.  7/10/2018: XTO Energy ran a good.  Spud Date:  I hereby certify that the information SIGNATURE  Type or print name Lindsay Deaver.	Rig Reabove is true and complete to	pertinent details, and C For Multiple Compart and form attached lease Date:  the best of my knowled the best of	give pertinent d pletions: Attach ed.	wellbore diagram of  DATE 7/10/201	8
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District 1 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720

## State of New Mexico

JUL 1 6 2018

Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office

RECEIVED

		BRADENHEAD TE	ST REPORT			
	Operator N	w.,		30-0	*API Numi:	
-Euri	ce monu	operty Name	D	<u>`</u>	mb -2	Vell No.
- Zuni	Le MONU		7 <u>11</u>	- 0	V OF	75 07.5
UL-Lot Section Tov	vnship Range	7. Surface Locat	N/S Line	Feet From	PAU V I	
	15 36E	1980	Nis Line	1980	E/W Line	County
		Well Statu	<b>S</b>	•		_
YES TA'D WELL NO	SHUT-IN YES	NO INJECTOR	SWD OIL	PRODUCER GAS	6/	DATE
		OBSERVED D				
	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Pro	d Csng	(E)Tubing
Pressure Flow Characteristics	Ø	Ø			Ø	650
Puff	V / AN	(Ŷ) N	Y/N		AY N	CO2
Steady Flow	YIN	YIN	Y/N		Y 129	WTR
Surges	YIN	¥ 1,29	Y/N		Y / 40 "	GAS
Down to nothing	Ø/ N	N (N	Y/ N		<b>9</b> 1 N	Type of Fluid injected for
Gas or Oil	YIAD	YIM	Y/N		CALK.	Waterflood if upplies.
Water	Y	Y/m	Y/N		Y/Ŋ	
Remarks — Picase state for en	ch string (A,B,C,D,E) per	inent information regarding blo	eed down or continuo	us build up if applic	es.	
	Chell XT	· Energy		OIL COI Entered into R		ION DIVISION
Title:				100-1031	~ 4	)
E-mail Address:	Phone:	_			- 1 M	
Date: 6/14/18	Witness.	Bane			<del></del>	

