

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

HOBBBS OGD  
 JUL 16 2018  
 RECEIVED

WELL API NO.	30-025-33778
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:	John D Knox
8. Well Number	14
9. OGRID Number	005380
10. Pool name or Wildcat	Eunice Monument; Grayburg-San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

**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 Injection

2. Name of Operator  
 XTO Energy, Inc.

3. Address of Operator  
 6401 Holiday Hill rd., Bldg 5

4. Well Location  
 Unit Letter J : 2337 feet from the South line and 1543 feet from the WEast line  
 Section 10 Township 21S Range 36E NMPM County Lea

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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: MIT / Bradenhead <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.

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 [Signature] 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 [Signature] 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>30-025-33778-</i>	
Property Name <i>John D Knox</i>		Well No. <i>14</i>	

7. Surface Location									
UL - Lot	Section	Township	Range		Feet from	N/S Line	Feet From	E/W Line	County
<i>J</i>	<i>10</i>	<i>21S</i>	<i>36E</i>		<i>2337</i>	<i>S</i>	<i>1543</i>	<i>E</i>	<i>Lea</i>

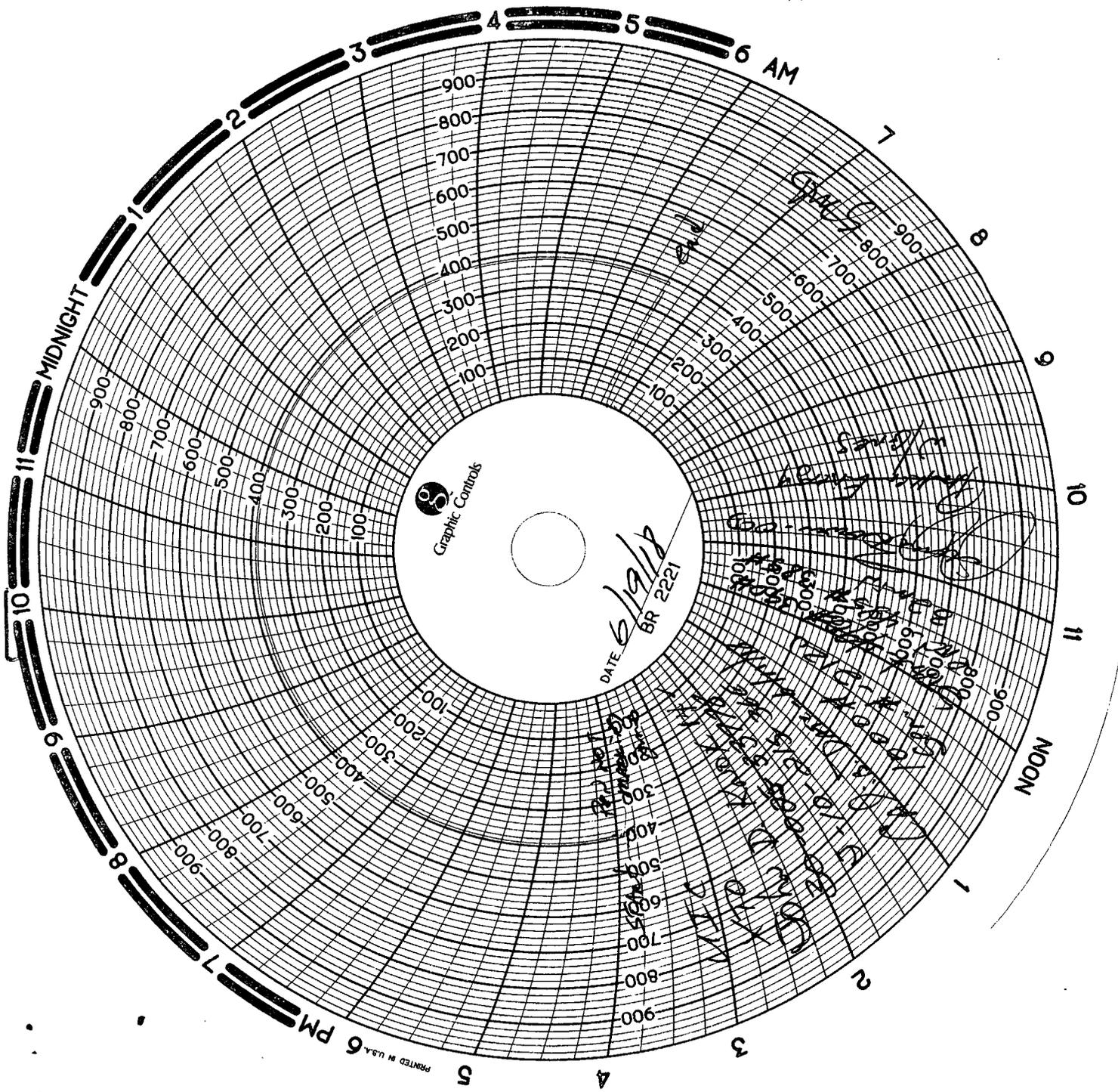
TA'D Well		SHUT-IN		INJECTOR		PRODUCER		DATE
YES	NO	YES	NO	INJ	SWD	OIL	GAS	
<input checked="" type="checkbox"/>				<i>6/19/18</i>				

OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<i>∅</i>	<i>—</i>	<i>—</i>	<i>∅</i>	<i>280</i>
<b>Flow Characteristics</b>					
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>	If applicable type
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	fluid injected for
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/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>Luis Cabella</i>	OIL CONSERVATION DIVISION Entered into RBDMS Re-test <i>JMS</i>
Printed name: <i>Luis Cabella X=0</i>	
Title:	
E-mail Address:	
Date: <i>6/19/18</i>	
Phone:	Witness: <i>[Signature]</i>



Graphic Controls

DATE 6/19/18  
BR 2221

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