

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

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

Form C-103
 Revised July 18, 2013

HOBBS OCD
RECEIVED
JUL 31 2018

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.)		WELL API NO. 30-025-23568
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other INJECTION		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CROSS TIMBERS ENERGY, LLC		6. State Oil & Gas Lease No. 312479
3. Address of Operator 400 W 7TH ST. FORT WORTH, TX 76102		7. Lease Name or Unit Agreement Name N VACCUM ABO UNIT
4. Well Location Unit Letter P : 660 feet from the S line and 860 feet from the E line Section 27 Township 17-S Range 34-E NMPM County LEA		8. Well Number 145
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4035 GR		9. OGRID Number 298299
		10. Pool name or Wildcat VAC; ABO, NORTH

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input checked="" type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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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.

- 1) MIRU. POOH w/tbg & packer. Replace tbg as needed. Redress or replace packer as needed
- 2) RIH w/tubing and packer and set @ previous setting depth 8,514'.
- 3) L&T backside. Circulate w/ packer fluid.
- 4) Notify NMOCD and perform MIT.

**Condition of Approval: notify
 OCD Hobbs office 24 hours
 prior of running MIT Test & Chart**

Spud Date: 9/22/1970 Rig Release Date: 10/22/1970

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Samanntha Angeles TITLE Regulatory Technician DATE 7/27/18

Type or print name Samanntha Angeles E-mail address: sangeles@mspartners.com PHONE: 817-334-7747

For State Use Only

APPROVED BY: Mary Brown TITLE AO/I DATE 8/1/2018
 Conditions of Approval (if any):