

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

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-32880
5. 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 L. VAN ETTEN
8. Well Number 15
9. OGRID Number 005380
10. Pool name or Wildcat EUMONT; YATES 7 RVRS QUEEN (GAS)

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 **HOBBS OCD**

2. Name of Operator **XTO ENERGY INC** **FEB 26 2019**

3. Address of Operator **6401 HOLIDAY HILL RD BLDG 5, MIDLAND, TX 79707** **RECEIVED**

4. Well Location
 Unit Letter N : 800 feet from the SOUTH line and 1900 feet from the WEST line
 Section 9 Township 20S Range 37E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3535GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	PNR
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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.

2/13/19 MIRU
 2/14/19 TAG CIPB@3150'. TEST CSG TO 500 PSI (GOOD). SPOT 25 SXS CL C CMT FROM 3150-2898'. WOC. TAG TOC @ 2905'
 2/15/19 SPOT 25 SXS CL C CMT FROM 2693-2437'. POH. SWI.
 2/18/19 TAG TOC @ 2454'. SPOT 40 SXS CL C CMT FROM 1396-989'. WOC. TAG @ 1006'. SPOT 40 SXS CL C CMT FROM 300' TO SURFACE. ND BOP. TOP OFF WELL. WELL P&A'D

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 Jessica Bonilla TITLE REGULATORY SUPERVISOR DATE 02/22/2019

Type or print name Jessica Bonilla E-mail address: JESSICA_BONILLA@XTOENERGY.COM PHONE: 432-620-6704

For State Use Only
 APPROVED BY: Kerry Forth TITLE Compliance Officer A DATE 3-1-19
 Conditions of Approval (if any):