

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

HOBBBS OGD  
 APR 09 2019  
 RECEIVED

WELL API NO. 30-25-04740
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 EUNICE MONUMENT SOUTH UNIT
8. Well Number 438
9. OGRID Number 005380
10. Pool name or Wildcat EUNICE MONUMENT GRAYBURG-SA

SUNDRY NOTICES AND REPORTS ON WELLS  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
XTO ENERGY, INC.

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

4. Well Location  
 Unit Letter B : 660 feet from the NORTH line and 1980 feet from the EAST line  
 Section 21 Township 21S Range 36E NMPM County LEA

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:		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"/>	<input checked="" type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

↓ p.m.  
 PNR

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

XTO respectfully submits the following plug and abandon summary.

03/20/19 to 03/27/2019

RIH set CIBP @ 3734'. PT to 500 psi (good). Spot 24 sxs cmt plug 3733 to 3481. WOC.  
 RIH tag TOC 3468', Spot 25 sxs cmt at 3118'. WOC  
 RIH tag TOC 2675', Set pkr @ 997', Perf @ 1535', Spot 25 sxs 1590' - 1338'. WOC.  
 RIH tag TOC 1339'. Perf @ 341', establish inj, squeeze 125 sxs cmt 391' - 191'. WOC.  
 RIH tag TOC 162'. Perf @ 60', spot 20 sxs cmt to surface.  
 Well PA'd 03/27/2019

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 Cheryl Rowell TITLE Regulatory Coordinator DATE 04/04/2019

Type or print name Cheryl Rowell E-mail address: cheryl\_rowell@xtoenergy.com PHONE: 432-571-8205

For State Use Only

APPROVED BY: Kerry Fute TITLE Compliance Officer A DATE 4-23-19  
 Conditions of Approval (if any):