

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 87404  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

**HOBBS OCD RECEIVED**  
 APR 25 2019

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised July 18, 2013

WELL API NO.	30-025-23699
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	312479
7. Lease Name or Unit Agreement Name	NORTH VACUUM ABO UNIT
8. Well Number	161
9. OGRID Number	298299
10. Pool name or Wildcat	VACUUM; ABOU NORTH
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	4020 GR

**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 INJ

2. Name of Operator  
CROSS TIMBERS ENERGY, LLC

3. Address of Operator  
400 W 7TH STREET, FORT WORTH, TX 76102

4. Well Location  
 Unit Letter H : 1980 feet from the N line and 660 feet from the E line  
 Section 12 Township 17-S Range 34-E NMPM County LEA

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

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input 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"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input checked="" 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.

4/15/19 - POOH W 2 3/8, J55 Tbg. PU & TIH w o/o tool & 229 jts 2 3/8"

4/16/19 - Latch on to pkr @ 7186'. POOH w 229 jts 2 3/8" & LD pkr. RU tbg tester. PU rebuilt pkr & test back under slips @ 5000 psi & TIH w 229 jts 2 3/8" J55 tbg

4/18/19 - PU Arrowset 1X pkr set @ 8505'. Pressure test backside to 40 psi for 30 mins. Held ok. Circ 200 bls pkr fluid.

4/22/19 - ND BOP. NU tree. Notified OCD of intent to run MIT. Gary from OCD witness. Ran MIT noticed fluid coming from surface csg valve. Chart showed 545 psi, ending 535 psi for 32 min. Failing MIT due to rule 19.15.26.11. Hook csg and surface csg back to bleed down line. NOI for Bradenhead remediation to follow.

Spud Date:

05/07/1971

Rig Release Date:

05/30/1971

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

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

SIGNATURE Samanntha Avarello TITLE Regulatory Technician DATE 04/24/2019

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

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 4-25-19  
 Conditions of Approval (if any):

**For State Use Only**