

District I - (575) 393-6161
District II - (575) 748-1283
District III - (505) 334-6178
District IV - (505) 476-3460

HOBBS OGD
MAY 01 2019
RECEIVED

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

Revised July 18, 2013

WELL API NO. 30-025-45810
5. Indicate Type of Lease STATE [X] FEE [ ]
6. State Oil & Gas Lease No. 312477
7. Lease Name or Unit Agreement Name NEW MEXICO BO STATE
8. Well Number 10
9. OGRID Number 298299
10. Pool name or Wildcat VACUUM; BLINEBRY (61850)
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3979

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 [X] Gas Well [ ] Other [ ]
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 : 2466 feet from the N line and 176 feet from the E line
Section 12 Township 18-S Range 34-E NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3979

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

NOTICE OF INTENTION TO:
PERFORM REMEDIAL WORK [ ] PLUG AND ABANDON [ ]
TEMPORARILY ABANDON [ ] CHANGE PLANS [ ]
PULL OR ALTER CASING [ ] MULTIPLE COMPL [ ]
DOWNHOLE COMMINGLE [ ]
CLOSED-LOOP SYSTEM [ ]
OTHER: [ ]
SUBSEQUENT REPORT OF:
REMEDIATION WORK [ ] ALTERING CASING [ ]
COMMENCE DRILLING OPNS. [ ] P AND A [ ]
CASING/CEMENT JOB [ ]
OTHER: SPUD [X]

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.

04/27/2019 - Spud well @ 1:30 pm. RIH W 42 jts of 9 5/8" #36 J55 LTC csg set @ 1744. Circ w full returns. PT to 1000psi for 30 mins

How much cement?
Jacks circulated?

Spud Date: 04/27/2019

Rig Release Date:

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 04/29/2019

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

APPROVED BY: [Signature] TITLE DATE 04/26/19

Conditions of Approval (if any):