

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 DISTRICT
HOBBS
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
 MAY 30 2019

WELL API NO.	30-025-23658
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	151
9. OGRID Number	298299
10. Pool name or Wildcat	VACUUM; ABO, NORTH
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	4030 GR

SUNDRY NOTICES AND REPORTS ON WORK RECEIVED
 (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 F 1980 feet from the N line and 2130 feet from the W line
 Section 23 Township 17-S Range 34-E NMPM County LEA

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 type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <u>MIT</u> <input checked="" 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.

5 YR MIT TEST 05/07/2019
 START PRESSURE 385, END PRESSURE 380

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 Samanntha Avarello TITLE Regulatory Technician DATE 05/29/2019

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

APPROVED BY: Shay Robinson TITLE Compliance Officer DATE 5-31-19
 Conditions of Approval (if any):

District I
 1625 N French Dr., Hobbs, NM 88240
 Phone (575) 391-6161 Fax (575) 391-0720

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office
BRADENHEAD TEST REPORT

Operator Name Cross Timber Energy, LLC	API Number 30-025-23658
Property Name North Vacuum ABO Unit	Well No 151

Surface Location

1/4 - 1/4 F	Section 23	Township 17S	Range 34E	Feet from 1980	N S Line FNL	Feet from 2130	E/W Line FWL	County Lea
----------------	---------------	-----------------	--------------	-------------------	-----------------	-------------------	-----------------	---------------

Well Status

Well Status	SHUT IN NO	PRODUCING	DATE 4-16-19	Inj.
-------------	---------------	-----------	-----------------	------

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

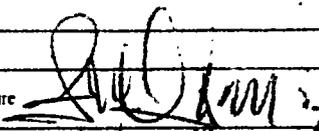
If bradenhead flowed water, check all of the descriptions that apply:

	(A) Surf-Interm	(B) Interm(1)-Interm(2)	(C) Interm-Prod	(D) Prod Casing	(E) Tubing
Pressure	φ	φ	—	—	
Flow Characteristics					
Puff	Y / φ	Y / φ	Y / N	Y / φ	
Steady Flow	Y / φ	Y / φ	Y / N	Y / φ	
Surges	Y / φ	Y / φ	Y / N	Y / φ	
Down to nothing	φ / N	φ / N	Y / N	φ / N	
Gas or Oil	Y / φ	Y / φ	Y / N	Y / φ	
Water	Y / φ	Y / φ	Y / N	Y / φ	

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
-------	-------	-------	--------	-------

Remarks: INJECTING AT THIS TIME ___ WTR. ___ GAS. ___ CO2

Signature 	OIL CONSERVATION DIVISION
Printed name Andrew Barriontes	Entered into RBDMS 
Title W.S.C. Operator	Re-test
E-mail Address an.barriontes@oilfieldservices.com	
Date 4-16-19	Phone 575-441-1634
Witness	