

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

HOBBS OCD
JUN 12 2019
RECEIVED

WELL API NO.	30-025-45809
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	312477
7. Lease Name or Unit Agreement Name	NEW MEXICO BO STATE
8. Well Number	9
9. OGRID Number	298299
10. Pool name or Wildcat	VACUUM; BLINEBRY (61850)
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3977

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-104) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well 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 I 2310 feet from the S line and 426 feet from the E line
 Section 12 Township 18-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>PRODUCTION 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.

06/06/2019 - Prod Csg Test
 Start pressure 650 psi, End pressure 630 psi
 Chart attached

Initial Test

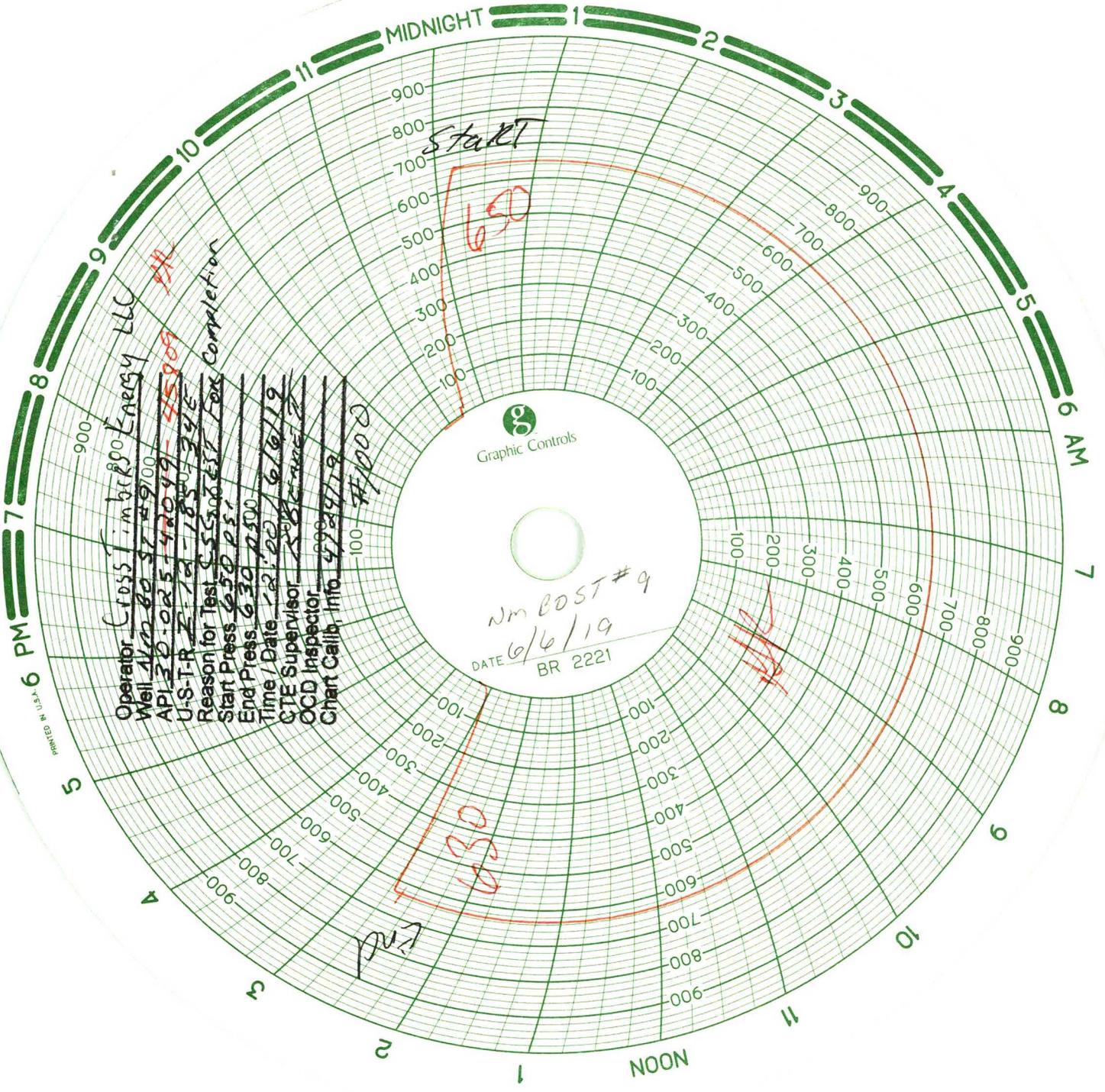
Spud Date: 04/27/2019 Rig Release Date: 04/25/2019

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 06/11/2019

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

APPROVED BY: Gay Robinson TITLE Compliance Officer DATE 6-14-19
 Conditions of Approval (if any):



Operator Cross Timber Energy LLC
 Well 4208074900
 API # 02542049-55909
 U.S.T.R. # 121850794E
 Reason for Test 55909.557 For Completion
 Start Press 650 PSI
 End Press 630 PSI
 Time / Date 12:00 / 6/6/19
 CTE Supervisor STANLEY
 OGD Inspector 2008
 Chart Callb. Info 4994779

Graphic Controls

NM COST # 9
 DATE 6/6/19
 BR 2221

Start

END

650

650

650

DESIGNED IN U.S.A.