

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 **HOBBS OCD**
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION JUN 14 2019
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO.	30-025-23777
6. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No.	312479
7. Lease Name or Unit Agreement Name	NORTH VAC ABO UNIT
8. Well Number	209
9. OGRID Number	298299
10. Pool name or Wildcat	NORTH VAC ABO
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	4050 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 [N]

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 J : 1980 feet from the S line and 1780 feet from the E line
 Section 22 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 checked="" 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: <input 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.

Plan to MIRU 6/17/19

- 1) POOH w/ tbg and packer and scan tbg.
 - a. Tubing string is 2-3/8", 4.6#, J-55 IPC
 - b. LD BB, GB, RB tbg. Replace w/ 2-3/8" YB or better
- 2) RBIH w/ Tbg String and redressed packer (or new packer, if needed). Test in the hole.
- 3) Set packer at previous depth of 8500'. Pressure test backside to 350 psi.
- 4) Release from on/off tool. Circulate backside with packer fluid. Latch back in to packer. Contact NMOCD & run MIT test per OCD representative's directive.

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

Spud Date: 05/25/1972 Rig Release Date: 05/08/2019

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 05/14/2019

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

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