

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

HOBBS OCD  
 JUN 13 2019  
 RECEIVED

OIL CONSERVATION DIVISION  
 1220 S. St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO.	30-025-23460
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 VAC ABO UNIT
8. Well Number	135
9. OGRID Number	298299
10. Pool name or Wildcat	VACUUM; ABO, NORTH
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	4040 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 76109

4. Well Location  
 Unit Letter L : 1980 feet from the S line and 860 feet from the W line  
 Section 11 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 checked="" 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 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.

Plan to MIRU 7/8/19

- 1) POOH w/ tbg and packer and scan tbg.
  - a. Tubing string is 2-3/8", J-55
  - 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 8511'. 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: 05/19/1970

Rig Release Date: 06/16/1970

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

SIGNATURE Samantha Avarello TITLE Regulatory Technician DATE 06/11/2019

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

APPROVED BY: Kerry Forte TITLE Compliance Officer A DATE 6-18-19  
 Conditions of Approval (if any):