

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) 334-6161  
1000 Rio Brazos Rd., Aztec, NM 87402  
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

<b>HOBBBS OCD</b> <b>MAY 15 2019</b> <b>RECEIVED</b>		<b>OIL CONSERVATION DIVISION</b>	
		220 South St. Francis Dr. Santa Fe, NM 87505	
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.)		WELL API NO. 30-025-23777	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> INJ		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
2. Name of Operator CROSS TIMBERS ENERGY, LLC		6. State Oil & Gas Lease No. 312479	
3. Address of Operator 400 W 7TH ST, FORT WORTH, TX 76102		7. Lease Name or Unit Agreement Name NORTH VAC ABO UNIT	
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		8. Well Number 209	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4050 GR		9. OGRID Number 298299	
		10. Pool name or Wildcat	

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 checked="" 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.

5/6/2019: MIRU. REL from Arrowset 1X packer. MIRU scan trk. SOOH with 265 jts 2-3/8" IPC and on/off tool. RDMO scan trk. RIH w/kill string.

5/7/2019: POOH w/kill string. RU test trk. TIH with on/off tool, 265 jts 2-3/8" IPC. RDMO test trk. Latch onto pkr. Test backside 400 psi for 30 min - held. RDMO pmp trk.

5/8/2019: RU pmp trk. Unlatch from pkr. Circ 190 bbls pkr fluid. Latch back onto pkr. Run MIT. RDMO. MIT chart attached (no OCD rep on site). Start Pressure 390 psi, End Pressure 390 psi. Bradenhead Test Report also attached.

Spud Date:

05/25/1972

Rig Release Date:

5/8/2019

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

SIGNATURE

*Connie Blaylock*

TITLE REGULATORY TECH

DATE

5/14/19

Type or print name CONNIE BLAYLOCK

E-mail address: cblaylock@mpartners.com

PHONE: 817-334-7882

For State Use Only

APPROVED BY:

*Kerry Fort*

TITLE

*Compliance Officer A*

DATE

6-14-19

Conditions of Approval (if any).

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

BRADENHEAD TEST REPORT

Operator Name <b>Cross Timbers Energy, LLC</b>	API Number <b>30-025-23777</b>
Property Name <b>North Vacuum ABO Unit</b>	Well No. <b>209</b>

7. Surface Location

UL - Lot <b>J</b>	Section <b>22</b>	Township <b>17S</b>	Range <b>34E</b>	Feet from <b>1980</b>	N/S Line <b>FSL</b>	Feet From <b>1780</b>	E/W Line <b>FEL</b>	County <b>LEA</b>
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Well Status

TA'D Well YES NO	SHUT-IN YES NO	INJECTOR <b>INJ</b> SWD	PRODUCER OIL GAS	DATE <b>5-8-19</b>
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OBSERVED DATA


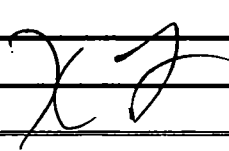
	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	<b>0</b>			<b>0</b>	<b>0</b>
Flow Characteristics					
Puff	Y/N <b>N</b>	Y/N	Y/N	Y/N <b>N</b>	CO2 _____
Steady Flow	Y/N <b>N</b>	Y/N	Y/N	Y/N <b>N</b>	WTR <input checked="" type="checkbox"/>
Surges	Y/N <b>N</b>	Y/N	Y/N	Y/N <b>N</b>	GAS _____
Down to nothing	Y/N <b>N</b>	Y/N	Y/N	Y/N <b>N</b>	If applicable type
Gas or Oil	Y/N <b>N</b>	Y/N	Y/N	Y/N <b>N</b>	fluid injected for
Water	Y/N <b>N</b>	Y/N	Y/N	Y/N <b>N</b>	Waterflood

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

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

**Bradenhead a MIT Performed Post Workover**  
**TBG LEAK**

Signature: 	OIL CONSERVATION DIVISION
Printed name: <b>KEVIN BENNETT</b>	Entered into RBDMS
Title: <b>LEASE OPERATOR</b>	Re-test
E-mail Address: <b>Kbennett@ctfieldsvcs.com</b>	
Date: <b>5-8-19</b>	
Phone: <b>575-513-8156</b>	
Witness:	

