

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 87424
 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
RECEIVED
AUG 15 2019

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

WELL API NO. 30-025-26327
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name ADKINS, A J
8. Well Number 2
9. OGRID Number 005380
10. Pool name or Wildcat EUNICE MONUMENT; YATES 7 RVRS QUEEN
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3553 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

2. Name of Operator
XTO ENERGY, INC.

3. Address of Operator 6401 HOLIDAY HILL RD #5
MIDLAND, TX 79707

4. Well Location
 Unit Letter F : 1650 feet from the NORTH line and 1650 feet from the WEST line
 Section 10 Township 21S Range 36E 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 checked="" 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 checked="" type="checkbox"/>	

J.P.M.

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.

XTO ENERGY, INC. respectfully submits a subsequent report of PA operations on the above referenced well.

08/09/2019: Tag @ 2715', Kerry Fortner w/ OCD approved to set CIBP @ 2702', tag CIBP @ 2697'.

08/10/2019: Test csg to 800psi - good. Spot 35 sx class C cmt fr/ 2702' - 2343', WOC, Tag TOC @ 2459', Perf @ 1430', sqz 50 sx cmt displace to 1380', WOC

08/11/2019: Tag TOC @ 1312', spot surface plug fr/ 300' to surface

Cutt off WH, install dry hole marker. Well PA'd.

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 Cassie Evans TITLE Regulatory Analyst DATE August 14, 2019

Type or print name Cassie Evans E-mail address: _____ PHONE: 432-682-8873

For State Use Only

APPROVED BY: Kerry Fortner TITLE Compliance Officer A DATE 8-16-19
 Conditions of Approval (if any): _____