

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

WELL API NO.  
 30-025-37281

5. Indicate Type of Lease  
 STATE  FEE

6. State Oil & Gas Lease No.

**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 B : 1210 feet from the North line and 1340 feet from the East line  
 Section 7 Township 21S Range 36E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
 3541' GR

HOBBS OCD  
 MAR 30 2020  
 RECEIVED

7. Lease Name or Unit Agreement Name  
 Eunice Monument South Unit

8. Well Number 681

9. OGRID Number  
 005380

10. Pool name or Wildcat  
 Eunice Monumnet; Graybug-San Andres

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"/>	<u>PANDA</u> <input checked="" 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.

XTO Energy, Inc. respectfully submits a subsequent report of pa operations on the above referenced well.

- 03/02/2020: Tag TOC @ 3697', Test csg to 500 psi - gd. Spot 55sx cmt f/ 3697' - 3140', WOC.
- 03/03/2020: Tag TOC @ 3239' Perf @ 3030', Spot 50sx displaced cmt to 2571', WOC.
- 03/04/2020: Tag TOC @ 2586', Perf @ 1300', Shut down due to weather.
- 03/05/2020: Spot 45 sx f/ 1349' - 898', WOC. Tag TOC @ 898', Perf @ 300', Circ 115 sx f/ 300' to surf. WOC well P7A'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 03/27/2020

Type or print name Cassie Evans E-mail address: cassie\_evans@xtoenergy.com PHONE: 432.215.3671

**For State Use Only**

APPROVED BY: Kenny Fat TITLE CO A DATE 4-3-20  
 Conditions of Approval (if any):