

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. 30-025-35462
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 Eunice Monument South Unit
8. Well Number 562
9. OGRID Number
10. Pool name or Wildcat Eunice Monument; Grayburg - San Andres

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 **HOBBS OCD**

2. Name of Operator
XTO Energy, Inc

3. Address of Operator 6401 Holiday Hill, Rd #5
Midland, Tx 79707 **APR 03 2020**

4. Well Location
 Unit Letter N : 1270 feet from the South line and 1410 feet from the West line
 Section 31 Township 20S Range 37E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3531' GR **RECEIVED**

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"/>	P AND A <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.

0/25/2020: Set 7" CIBP @ 3650', Tag CIBP @ 3665', Test csg to 500 psi - gd.
 03/26/2020: Kerry Fortner w/ OCD recommended to spot 50 sx cmt on top of the CIBP. Spot 50sx f/ 3680' - 3390', WOC.
 03/30/2020: Tag TOC @ 3635', L&T csg to 500 psi - gd. Kerry Fortner w/ OCD approved to proceed. Spot 55sx cmt @ 2823' - 2503', WOC. Tag TOC @ 2531'.
 03/31/2020: Perf @ 550', Kerry Fortner w/OCD recommended to spot cmt plug f/ 600' to Surf. Spot 130 sx f/ 600' to surf, woc, top off WB w/ cmt. 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 04/01/2020

Type or print name Cassie Evans E-mail address: cassie_evans@xtoenergy.com PHONE: 432.218.3671
For State Use Only

APPROVED BY: Kerry Fortner TITLE CC A DATE 4-7-20
 Conditions of Approval (if any)