

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 OGD**  
**CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
AUG 27 2020

WELL API NO.	30-025-23758
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	214
9. OGRID Number	298299
10. Pool name or Wildcat	NORTH VAC. ABO NORTH
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4097 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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> INJ	
2. Name of Operator	CROSS TIMBERS ENERGY, LLC
3. Address of Operator	400 W 7TH STREET FORT WORTH, TX 76102
4. Well Location Unit Letter D: 790 feet from the N line and 790 feet from the W line Section 11 Township 17-S Range 35-E NMPM County LEA	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4097 GR	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" 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 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.

Plan to MIRU 8/26/2020

1. MIRU. POOH w/ 2-3/8" tbq and seal assembly. Replace tbq as needed.
2. RBIH w/ tubing and seal assembly and sting back into packer @ 8,560'.
3. L&T backside. Release from packer, circulate w/ packer fluid, sting back into packer.
4. Notify NMOCD and perform MIT.

**Condition of Approval: notify  
OCD Hobbs office 24 hours  
prior of Test & Chart**

Spud Date:

04/28/1971

Rig Release Date:

05/26/1971

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

SIGNATURE Samanntha Avarello TITLE Regulatory Technician DATE 08/19/2020

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

APPROVED BY: Kenny Fort TITLE C O A DATE 9-19-20  
Conditions of Approval (if any):