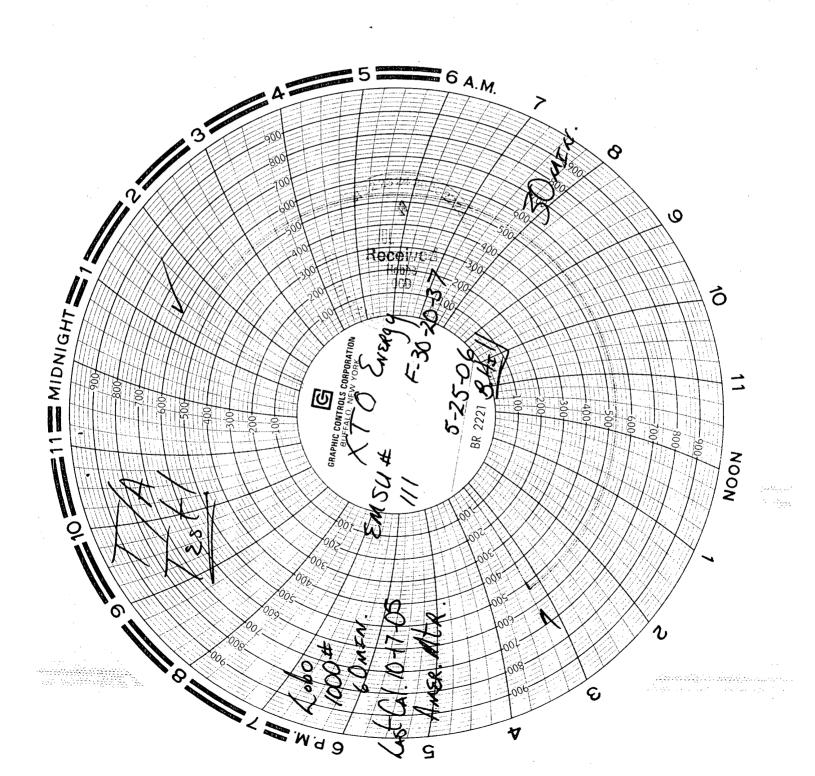
| Submit 3 Copies To Appropriate District Office | State of New Mexico | | Form C-103 | | |
|--|--|----------------------------------|---|-----------------------------|--|
| District I | Energy, Minérals and Natural Resources | | May 27, 2004 | | |
| 1625 N. French Dr., Hobbs, NM 88240 District II | | | WELL API NO. 30-025-06283 | | |
| 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | 5. Indicate Type of Lease | | |
| District III 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | STATE X FEE | | |
| District IV | Santa Fe, NM 87505 | | 6. State Oil & Gas Lease No. | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | t. Francis Dr., Santa Fe, NM | | 300717 | | |
| 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 | | | 7. Lease Name or Unit Agreement Name | | |
| PROPOSALS.) | | | EUNICE MONUMEN | IT GRAYBURG | |
| 1. Type of Well: Oil Well Gas Well X Other | | | | 8. Well Number 111 | |
| 2. Name of Operator | | | 9. OGRID Number 5380 | | |
| XTO ENERGY INC. | | | 10 Deel Wild | I4 FIDUCE | |
| 3. Address of Operator 200 LORAINE STE 800 MIDLAND, TX 79701 | | | 10. Pool name or Wildcat EUNICE MONUMENT;GRAYBURG-SAN ANDRES | | |
| 4. Well Location | | | 480 | | |
| Unit Letter A | _: <u>1980</u> feet fro | m the N line | and <u>1990</u> 1 | feet from the | |
| W line Section 36 | Township | 20-S Range 36 | E NMPM | County LEA | |
| Section Av | 831 | hether DR, RKB, RT, GR, etc | | County LEA | |
| Application of the property of | | | | | |
| Pit or Below-grade Tank Application | | | | | |
| Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water | | | | | |
| Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material | | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | | | |
| PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☐ ALTERING CASING ☐ | | | | | |
| TEMPORARILY ABANDON | | | | | |
| PULL OR ALTER CASING | MULTIPLE COMPL | ☐ CASING/CEMEN | IT JOB | | |
| OTHER: | | □ OTHER: Mit | | <u> </u> | |
| 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. | | | | | |
| TA'D WELL | | | | | |
| MIT TEST OK, CHART | ATTACHED | | | | |
| XTO REQUEST AN EXT | FNSION OF THE TA'D | STATUS WHILE EVALUA | ΤΙΛΝ ΤΛ ΡΕΤΙΙΝΝ ΤΛ Ι | DPODITOTION | |
| ATO IEQUEST AIN EAT | ENGION OF THE TAID | STATOS WILLE EVALUA | ron to return to i | 118192027 | |
| | | الأكراب المستوين | 7570 | . 153/ | |
| This Approval of Temporary 5/25/1/ Abandonment Expires | | | | | |
| | Abandonment Exp | ITES TOTAL | 27 | 6 P W 12 | |
| | | | 111213 | 260.8 | |
| I hereby certify that the information | above is true and comple | ete to the best of my knowleds | 10 9 | ify that (fix nit or helpi) | |
| grade tank has been will be constructed o | r closed according to NMOCD | guidelines □, a general permit □ | or an (attached) alternative (| OCD-approved plan . | |
| SIGNATURE Julie W. | Se_ TITLE_ | Regulatory Analyst | DATEJul | [<u>v21, 2006</u> | |
| Type or print name Julie Wilso | n E-mail address: | Julie Wils Die Ferry | m Telephone No. | 432-620-6744 | |
| For State Use Only | | | | | |
| APPROVED BY: | 1). Wind | TITLE | WSTAFF A | JANA 2006 | |
| APPROVED BY: Conditions of Approval (if any) | W. WWW | TITLE | DA′ | TE | |
| The state of the s | | | | | |



EMSU 111

06283

F-30-205.37 E

1980 N/1980 W Prop 300717

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