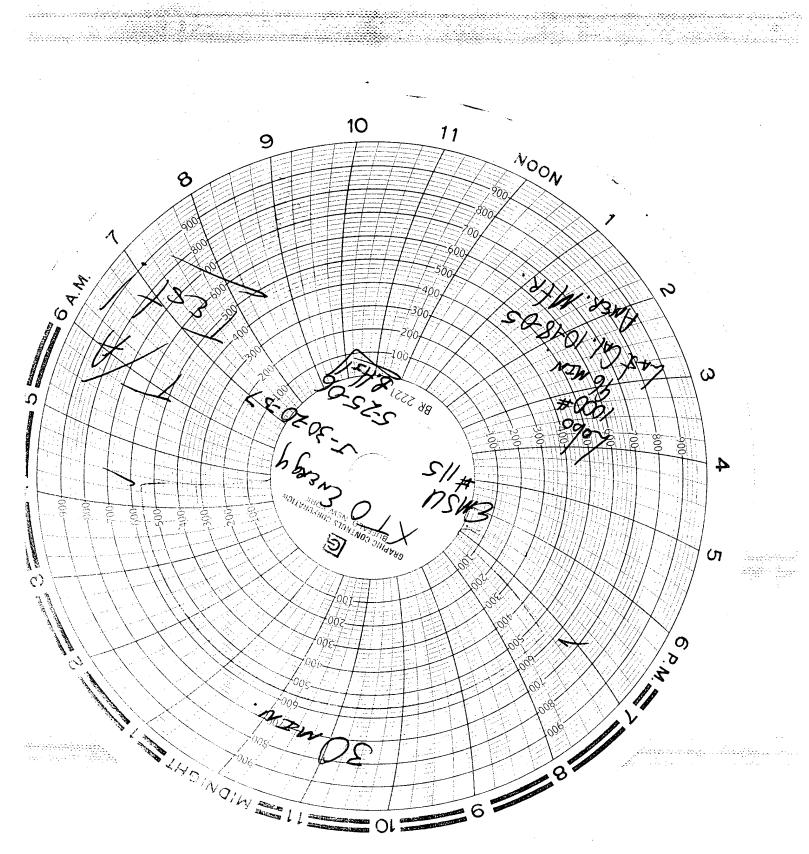
Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Matural Resources	May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-025-06295
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> 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	est.	23000
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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.)		EUNICE MONUMENT SOUTH UNIT
	s Well Other	8. Well Number 115
2. Name of Operator XTO ENERGY INC.		9. OGRID Number 5380
3. Address of Operator		10. Pool name or Wildcat EUNICE
200 LORAINE STE 800	MIDLAND, TX 79701	MONUMENT: GRAYBURG-SAN ANDRES
4. Well Location		
Unit Letter J: 1980 feet from the SOUTH line and 1980 feet from the EAST line		
Section 30	Township 20 S Range 37 E	NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
Pit or Below-grade Tank Application or Closure		
		Note that the second se
District Third Control of the Contro		
John Constitution 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		RILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEME	NT JOB
OTHER:	OTHER: MI	r tect 🗸
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.		
MIT TEST – CHART ATTACHED		
•		
	1 1	
	nis Approval of Temporary 3/25/1	,
At	pandonment Expires	7 12 15 16 17 18 79 18 19 18 19 18 19 18 19 18 19 18 19 18 19 19 19 19 19 19 19 19 19 19 19 19 19
		ACAD TO SO
•	• :	(A)
		© € € €
		(a) 6 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
I hereby certify that the information a	bove is true and complete to the best of my knowled	lge and belief. I further certify that any pit or below-
grade tank has been/will be constructed or c	losed according to NMOCD guidelines , a general permit	or an (attached) alternative OCD-approved plan [1].
SIGNATURE // Syn. //	TITLE REGULATORY ANALYS	ST <u>DATE</u> 7/17/2006
- Ye	MEDICATORI ANALIS	ST <u>DATE </u>
Type or print name M. LYN MA	RR E-mail address: Lyn Marr@xtoenerg	v.com Telephone No. 432-620-6714
For State Has Only		
APPROVED BY: Jany W. WILL TITLE HERRESENTATIVE II/STAFF MANAGER JUL 25 2006 Conditions of Approval (if any): OG FIELD REPRESENTATIVE II/STAFF MANAGER JUL 25 2006		
Conditions of Approval (if any):	OC FIELD REPRESENTA	DATE
//	(gr = set state)	



ENSU 115-06295 J-30-205-37E 1980 5/E 84 oil 30077

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