Submit 3 Copies To Appropriate District	State of New Me				Form C		
Office District I	Energy, Minerals and Natur	ral Resources			May 27,	2004	
1625 N. French Dr., Hobbs, NM 87240			WELL API	NO. 0-025-31112			
District II 1301 W. Grand Ave., Artesia, NM 88210	W. Grand Ave. Artesia NM 88210			5. Indicate Type of Lease			
District III	1220 South St. Francis Dr.			STATE X FEE			
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV							
1220 S. St. Francis Dr., Santa Fe, NM 87505			6. State Oil	& Gas Lease No	o.		
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.)			7. Lease Name or Unit Agreement Name: Eunice Monument South Unit B				
1. Type of Well:			8. Well Number				
Oil Well X Gas Well	Other		9. OGRID N	881	.		
2. Name of Operator			9. OGRID I	005380			
XTO Energy, Inc.			10 Pool no	me or Wildcat			
3. Address of Operator 200 N. Loraine, Ste. 800 Midland, TX 79701			Eunice Monument: Grayburg-San Andres				
4. Well Location	Midiana, IX 79701	1	Luittee Ho	Hamerre, arays	ary Juli A	idi ÇŞ	
Unit Letter K :	2080 feet from the Sou	ith line and	1880 f	feet from the	West	_ line	
Section 13	Township 20S	Range 36E	NMPM	County	y Lea	1	
	11. Elevation (Show whether	DR, RKB, RT, GR, et	c.)				
Pit or Below-grade Tank Application	or Closure						
Pit type Depth to Groundwater	Distance from nearest fresh	n water well Dis	tance from near	rest surface water _			
Pit Liner Thickness: mil	Below-Grade Tank: Volume.	bbls; Construction	on Material				
NOTICE OF INTERPERSON TEMPORARILY ABANDON DULL OR ALTER CASING	PLUG AND ABANDON CHANGE PLANS MULTIPLE	SUB REMEDIAL WORK COMMENCE DRILLI CASING TEST AND	SEQUEN ⁻	T REPORT (ALTEF PLUG	RING CASII	NG 🗆	
	COMPLETION	CEMENT JOB				L A J	
OTHER:		OTHER: Extend TA				<u>X</u>	
13. Describe proposed or completed of starting any proposed work). or recompletion.Ran MIT on 4/10/07 - CopyXTO would like to request	SEE RULE 1103. For Multiple	e Completions: Attach	wellbore dia	gram of propose	imated dated decompletion	on 	
•	of Temporary 4/10	1	(6	4 50 6 62 8X	(1×30)	⁷ /	
I hereby certify that the information a							
grade tank has been/will be constructed or o	A . ()		Jor an (attaci ry Analyst		04/40/		
SIGNATURE	111			DATE_ xtoenergy.com			
Type or print name Kristy Ward	n	LAGE NICH BERNESE	NTATIVE II!	STAFFINANIA AS	32 -620 ₂	67 4 0	
Type or print name Kristy Ward For State Use Only APPROVED BY APPROVED BY DATE APROVED BY							
APPROVED BY Conditions of Approval, if any:	TIT	ΓLE		DATE	APK 9	- 20 37	
Conditions of Approval, if any.							

