

WELL API NO. 30-025-21251 ✓	
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 258 ✓	
9. OGRID Number 005380 ✓	
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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injection <input type="checkbox"/>	
2. Name of Operator XTO Energy, Inc. ✓	
3. Address of Operator 200 N. Loraine, Ste. 800 Midland, TX 79701	
4. Well Location Unit Letter <u>U</u> : <u>940'</u> feet from the <u>South</u> line and <u>940'</u> feet from the <u>West</u> line Section <u>4</u> Township <u>21S</u> Range <u>36E</u> NMPM County <u>Lea</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> 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:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Extend TA Status ☒

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 Chart Attached. Test was performed on 4/7/08.

XTO is currently evaluating this well and at this time would like to request an extension of the TA Status until this evaluation can be completed.

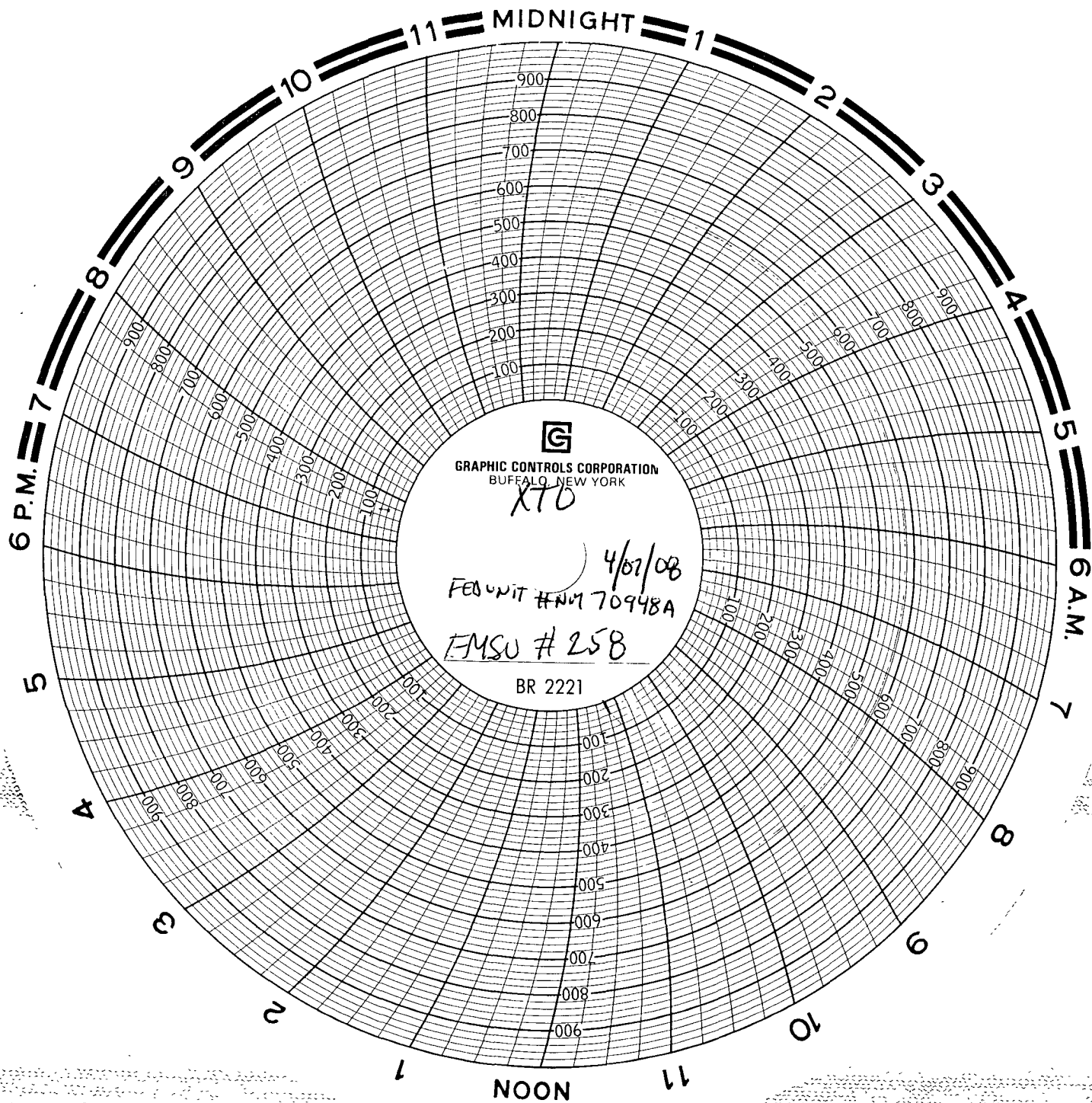
This Approval of Temporary Abandonment Expires 4/25/2013

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Kristy Ward TITLE Regulatory Analyst DATE 04/08/08
Type or print name Kristy Ward E-mail address: kristy_ward@xtoenergy.com
Telephone No. 432-620-6740

For State Use Only

APPROVED BY Chris Williams TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE APR 25 2008
Conditions of Approval, if any:



XTO
EMSU # 258
UNIT U, SEC 4, T21S, R36E
F01 UNIT # N4 70948A

Adam Miller
XTO

DAVID MACIAR
KEY 407
TRK # 0113237
TB @ PST
SURFACE @ PSI
INT @ PSI
CASINA @ PSI