	State of New Mexico	Form C-103		
Office <u>District I</u>	Energy, Minerals and Natural Resources	June 19, 2008		
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API NO. 30-025-38304		
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		B-1519-2		
SUNDRY NOTICE	ES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name		
(DO NOT USE THIS FORM FOR PROPOSA	LS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			
PROPOSALS.)	TION FOR PERMIT" (FORM C-101) FOR SUCH	Encore 22 State Com		
	as Well Other	8. Well Number 001		
2. Name of Operator		9. OGRID Number 5380		
XTO Energy Inc.		10. Pool name or Wildcat		
3. Address of Operator 200 N. Loraine, Ste. 800 Midland,	TY 70705	Vacuum; Atoka-Morrow, North		
4. Well Location				
Unit Letter H :	1730' feet from theN line and Township 17S Range 34E			
Section 22	11. Elevation (Show whether DR, RKB, RT, GR, etc.			
新教 文本 编章 并 有	11. Elevation (Snow whether DR, RRB, R1, OR, etc.	A A B T T T T		
		Emiliary of State State of the American State of the Stat		
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				
<u>==</u>		ILLING OPNS. P AND A		
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL CASING/CEMEN	IT JOB L		
DOWNHOLE COMMINGLE				
OTHER: Request for extension to	provide log OTHER:			
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.				
	the Encore 22 State Com #001, 7/22/2008. We we	ould like to request a 90 day extension on		
providing the OCD with logs for this	s well.	providing the OCD with logs for this well.		
Spud Date:	Rig Release Date:			
Spud Date:	Rig Release Date:			
Spud Date:	Rig Release Date:			
	Rig Release Date:	ge and belief.		
I hereby certify that the information ab	pove is true and complete to the best of my knowleds	ge and belief.		
I hereby certify that the information ab	nove is true and complete to the best of my knowledge			
	pove is true and complete to the best of my knowleds			
I hereby certify that the information ab	ove is true and complete to the best of my knowledg			
I hereby certify that the information about SIGNATURE Shows Factor	ove is true and complete to the best of my knowledg	DATE8/21/08 xtoenergy.com PHONE: _432.620.6709		
I hereby certify that the information at SIGNATURE Shows Tack Type or print name Sherry Pack For State Use Only	TITLERegulatory Analyst E-mail address: sherry_pack@:	DATE8/21/08 *toenergy.com PHONE: _432.620.6709 SEP 0 3 2008		
I hereby certify that the information ab SIGNATURE Sherry Pack Type or print name Sherry Pack	ove is true and complete to the best of my knowledg	DATE 8/21/08 xtoenergy.com PHONE: 432.620.6709		