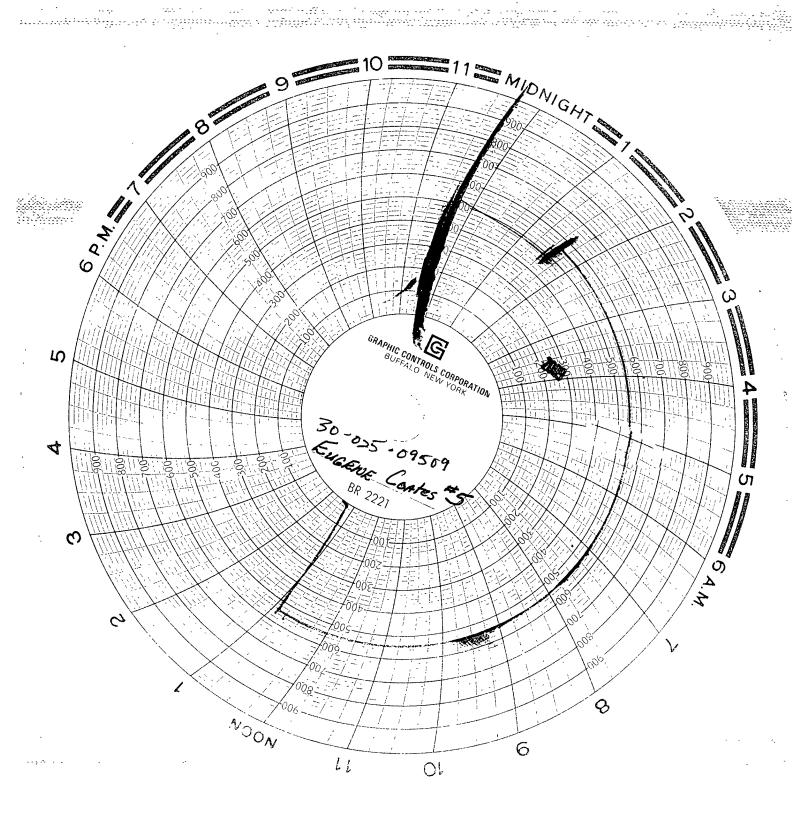
Submit 3 Copies To Appropriate District State of New Mexico	Form C-103
Office District I Office District I	June 19, 2008
1625 N French Dr., Hobbs, NM 87240	00 005 00500
District II 1301 W. Grand Ave., Artesia, NM 883AN 15 / 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd , Aztec, NM 87410 District IV Santa Fe, NM 87505	STATE FĘE X
1220 S St. Francis Dr., Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAC DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	Lugerie Coates
1. Type of Well: Oil Well X Gas Well Other	8. Well Number 5
2. Name of Operator XT0 Energy, Inc.	9. OGRID Number 005380
3. Address of Operator	10. Pool name or Wildcat
200 N. Loraine, Ste. 800 Midland, TX 79701 4. Well Location	Langlie Mattix: 7 Rvrs-Q-Grayburg
Unit Letter I : 1980' feet from the South line	and 660' feet from the East line
Section 3 Township 24S Range	36E NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
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 CHANGE PLANS COMMENCE DRILLING OPNS. P AND A	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
DOWNHOLE COMMINGLE	IMENT JOB
DOWNHOLE COMMININGLE	
OTHER: DOTHER: EX	ktend 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 1/08/09.	
XTO would appreciate an extension to the TA'd Status of this well at this time. Evaluation of this well is currently in progress with intentions to return to production or either plug and abandon.	
	This Approval of Temporary Abandonment Expires
Spud Date: Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my k	nowledge and belief.
	egulatory Analyst DATE 01/13/09
Type or print name Kristy Ward E-mail address: PHONE 432-620-6740	
For State Use Only APPROVED BY OTHER DISTRICT 1 SUPERVISOR DATE 1 1 1 6 2009	
APPROVED BY DATE DATE	



1-8-09 Key (407) Cal-1-20-08 Eugene CoAts*5

Berger (1995) - Frank Berger (1995) - Frank

REC'D/MIDLAND JAN 13 2009