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Submit 3 Copies To Appropriate District  State of New Mexic	
Office Energy, Minerals and Natural District I	
1625 N. French Dr. Hobbs, NM 87240	WELL API NO. 30-025-34846
District II  1301 W Grand Ave, Artesia NASS210 LIVEL CONSERVATION District III  1220 South St. Franci	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd, Aztec, NM 87410 District IV SEP 3 0 2010 Santa Fe, NM 8750	
1220 S. St. Francis Dr., Santa Fe, NM	6. State Oil & Gas Lease No.
87505 HOBBSOCL	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR F DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) F PROPOSALS.)	PLUG BACK TO A Funice Monument, South Unit.
1. Type of Well: Oil Well X Gas Well Other	8. Well Number 596
2. Name of Operator	9. OGRID Number
XTO Energy, Inc.	005380
3. Address of Operator	10. Pool name or Wildcat
200 N. Loraine, Ste. 800 Midland, TX 79701 4. Well Location	Eunice Monument; Grayburg-San Andres
Unit Letter L: 2868' feet from the North line and 335' feet from the West line	
Unit Letter L : 2868' feet from the North	line and335' feet from theWest line
Section 5 Township 21S Ran	<del></del>
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 RE	EMEDIAL WORK ALTERING CASING
TEMPORARILY ABANDON	DMMENCE DRILLING OPNS. P AND A
PULL OR ALTER CASING  MULTIPLE COMPL  CA	ASING/CEMENT JOB
DOWNHOLE COMMINGLE	<del></del>
BOWNIOLE GOWNINGLE	
OTHER:	THER: 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.	
XTO would like to extend the TA status of this well due to that we are currently evaluating potential in	
the Grayburg formation.	
MIT chart attached. This Appro	oval of Temporary nent Expires
Abandonn	nent Expires
Spud Date: Rig Release I	Date:
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE & Auth Nord PRINTER POPULATION APPLIES DATE OF 15 10	
SIGNATURE TITLE	Regulatory Analyst DATE 09-15-10 Regulatory Analyst
Type or print name Kristy Ward E-mail address: PHONE 432-620-6740	
For State Use Only	
APPROVED BY Conditions of Approval (if any):  TITLE STOFF MGE  DATE 10 - 4-10	
Conditions of Approval (if any):	

