Submit 3 Copies To Appropriate District State of New Me Office Minerals and Natu			Form C-103 June 19, 2008					
District I 1625 N. French Dr., Hobbs, NM 87240 District II 1301 W. Grand Ave., Artesia, NM 88210 District II 1301 W. Grand Ave., Artesia, NM 88210 DECOIL CONSERVATION DIVISION 1220 South St. Francis Dr.		WELL API NO. 30-025-35543 5. Indicate Type of Lease STATE X						
					1000 Rio Brazos Rd., Aztec, NM 87410 HOBBSUC Santa Fe, NM 87505 District IV		6. State Oil & Gas Lease No.	
					1220 S. St. Francis Dr., Santa Fe, NM 87505		6. State Off & Gas Lease No.	
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: Arrowhead Grayburg Unit						
1. Type of Well: Oil Well X Gas Well Other		8. Well Number 337Y						
2. Name of Operator XTO 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		Arrowhead; Gr	ayburg /					
	- 1 1 1	1070 0 0						
Unit Letter $\mathcal{X} \mathcal{A} := 60$ feet from the Not	rth line and	1270 feet fi	rom the <u>East</u>	line				
Section 2 Township 22S	Range 36E	NMPM	County	Lea				
11. Elevation (Show whether 355	<i>DR, RKB, RT, GR, et</i> 59' GL	c.)						
12. Check Appropriate Box to Indicate	Nature of Notice, 1	Report, or Othe	er Data					
NOTICE OF INTENTION TO: SUE		SEQUENT REPORT OF:						
PERFORM REMEDIAL WORK D PLUG AND ABANDON REMEDIAL WORK			ALTERING CA					
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILL			P AND A					
		_		L				
	CASING/CEMENT J							
OTHER:	OTHER: TA Extens	sion	· · ·	X				
13. Describe proposed or completed operations. (Clearly state all performing any proposed work). SEE RULE 1103. For Multiple or recompletion.								
XTO would like to request a TA extension on this we be some opportunity to capture production since it good production.								
	This Ann							
MIT chart attached	Abandon	roval of Temp ment Expires	00rary _/2-3-20	<u>יןן</u>				
				14				
Spud Date: Rig Relea	ase Date:							
I hereby certify that the information above is true and complete to the	e best of my knowledg	e and belief.						
SIGNATURE Patty Unas TIT		ry Analyst	DATE 12/	9/10				
patty_urias@xtc Type or print name <u>Patty Urias</u> E-mail address:				20-4318				
For State Use Only								
APPROVED BY Congelin TI	TLE_STATE	maz	_DATE <u>12-1</u>	3-10				
Conditions of Approval (if any);				~				

