Submit 3 Copies To Appropriate District	State of New Mexico		Form C-103
Office Energy, District I	Minerals and Natural Resource	es	June 19, 2008
Submit 3 Copies To Appropriate District Office District 1 1625 N. French Dr., Hobbs, NM 87240 District II		WELL API NO. 30-025-29	810
1301 W. Grand Ave., Artesia, NM 8824617 7 7 6 1	ONSERVATION DIVISION	5. Indicate Type of L	
District III 1000 Rio Brazos Rd., Aztec, NM87(10865)	Santa Fe, NM 87505	STATE X	FEE 🗆 /
District IV	Santa Fe, Nivi 8/303	6. State Oil & Gas Le	
1220 S. St. Francis Dr., Santa Fe, NM 87505		6. State Off & Gas Le	ase 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.)		Larree Hondillene 3	
1. Type of Well: Oil Well X Gas Well Other		8. Well Number 127	
Name of Operator     XTO Energy, Inc.		9. OGRID Number 005380	
3. Address of Operator		10. Pool name or Wil	
200 N. Loraine, Ste. 800 Midland, TX 79701   Eunice Monument; Grayburg-Sar 4. Well Location			Grayburg-San Andres
Unit Letter N: 500	Feet from the South line	e and 2080 feet from the	he <u>West</u> line
	Township 20S Range		County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3532.8' GL			
12. Check Appropriate	Box to Indicate Nature of I	Notice, Report, or Other Da	ta .
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  ALTERING CASING			
<u> </u>		<del></del>	<u></u>
TEMPORARILY ABANDON CHANGE			P AND A
·	LE COMPL L CASING/CE	EMENT JOB	
DOWNHOLE COMMINGLE			
OTHER: TA Extension	OTHER:	TA	
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 request a TA externor plug the well and are reviewing			
MIT CHART ATTACHED	This Approval of Tempor	arv	
	This Approval of Tempor Abandonment Expires	3-2-2012	
	,		
Spud Date:	Rig Release Date:		
I hereby certify that the information above is true	e and complete to the best of my k	nowledge and belief.	
SIGNATURE Tatty Wies		egulatory Analyst DA	ATE 3/10/11
Type or print name Patty Urias	E-mail address:		ONE <u>432-620-4318</u>
For State Use Only	[ ]	nell no	E 3-14-201
APPROVED BY Conditions of Approval (if any):	TITLE 57	DAT	E - 17-201/



## **WELL DATA SHEET**



