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Submit One Copy To Appropriate District Office	State of New Me	exico Tol Rossum HOB	BSOCD	Form C-103 January 20, 2011
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	State of New Mexico Energy, Minerals and Natural Resources 40		WELL API NO.	3undary 20, 2011
District II	OIL CONCEDIATION DIVICION		30-025-04752	
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr		5. Indicate Type of Leas STATE x	se FEE 🗍
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505		6. State Oil & Gas Leas	
1220 S. St. Francis Dr., Santa Fe, NM		/		
87505	S AND REPORTS ON WELLS		7. Lease Name or Unit	Agreement Name
(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			Eunice Monument South Unit	
PROPOSALS.)  1. Type of Well: x Oil Well  Gas Well  Other			8. Well Number 445	
2. Name of Operator			9. OGRID Number	
XTO Energy, Inc.			005380	
3. Address of Operator 200 Loraine Ste. 800 Midland, TX 79701			10. Pool name or Wildcat Eunice Monument; Greyburg-San Andres	
			Eunice Monument, Gre	yourg-san Andres
4. Well Location		C 41 - W 41		/
	from the North line and 660 feet to			
	<u>IS Range 36E NMPM</u> 1. Elevation (Show whether DR)	County Lea	)	
The state of the s	11. Elevation (show whether DK,	, KKD, K1, OK, etc.,		
12. Check Appropriate Box to I	ndicate Nature of Notice, R	Report or Other I	Data	
		-		T 05
NOTICE OF INTE		REMEDIAL WOR	SEQUENT REPOR	.TOF: ERING CASING □
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI			_	<del>_</del>
	MULTIPLE COMPL	CASING/CEMEN		
			**************************************	ay yaasaa magaayaa gaa aanaa aa ayyaana
OTHER:		Location is r	eady for OCD inspection	after P&A
N/A All pits have been remediated in N/A Rat hole and cellar have been fil				sure pian.
x A steel marker at least 4" in diameter				
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR				
	TOWNSHIP, AND RANGE.		<u>ON HAS BEEN WELDE</u>	<u>D OR</u>
PERMANENTLY STAMPE	D ON THE MARKER'S SUR	FACE.		
x The location has been leveled as nea	arly as possible to original groun	d contour and has b	been cleared of all junk, tra	sh, flow lines and
other production equipment.			3	,
x Anchors, dead men, tie downs and r				
x If this is a one-well lease or last remrules and the terms of the Operator's pir				
lease and well location.	t permit and closure plan. An in	ow fines, production	ii equipment and junk nave	, been removed from
x All metal bolts and other materials ha	ave been removed. Portable bas	es have been remov	ved. (Poured onsite concre	te bases do not have
to be removed.)			D	
<ul><li>x All other environmental concerns have been a</li></ul>				wed from non.
retrieved flow lines and pipelines.	ibandoned in accordance with 13	7.13.33.10 NWAC.	All fluids have been feme	·
x If this is a one-well lease or last remaining well on lease, all electrical service, poles and lines, not to include primary service company				
equipment, has been removed from leas		~		•
When all work has been completed, ret	urn this form to the appropriate I	District office to sch	nedule an inspection.	
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SIGNATURE JAM Roll	TITLE P	umper	_DATE 03/01/11	
•				
TYPE OR PRINT NAME John Robin	· —	<del>-</del>		
For State Use Only	).II	) /1	Ficer DAT	/ /
ADDROVED BY. Wash (1)	hitaken_ TITLE	omshance ()	Halicer DAT	DE 03/07/2011

Conditions of Approval (if any):