Form 3160-5 (April 2004)

## UNITED STATES DEPARTMENT OF THE INTERIOR

## **BUREAU OF LAND MANAGEMENT**

## SUNDRY NOTICES AND REPORTS ON WELLS

/
FORM APPRÓVED
OMB NO, 1004-0137
Expires March 31, 2007

5. Lease Serial No.

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - (		2005	<del>JUL 3</del>		greement, Name and/or No
1. Type of Well Oil Well X Gas Well Other  2. Name of Operator XTO ENERGY INC.  3a. Address 2700 Farmington Ave., Bldg. K. Ste  4. Location of Well (Footage, Sec., T., R., M., or Survey I., 620' FSL & 790' FEL Sec. 09, T26.	1 Farmington Description	ne No sinclude area;	70 FARM code) -1090	Basin Dakota 11. County or Pa San Juan	#1E
TYPE OF SUBMISSION		TYPE	OF ACTION		
Notice of Intent	Alter Casing  Casing Repair  Change Plans  Convert to Injection  y state all pertinent details, includible the horizontally, give subsurface rformed or provide the Bond No. If the operation results in a multip Notices shall be filed only after action.)  Cal treatment on this  216-B scavenger down  in sep outlet to tree discharge line from ce	locations and measur on file with BLM/BI ole completion or reco ill requirements, include well in the factor of the TCA. pumped 3 at H2S. RUMO compressor to m	Reclamatio Recomplete Recomplete Temporaril Water Disp  date of any proced and true ver A. Required sompletion in a riding reclamatio collowing m  gals 216- pump truck eter run.	y Abandon  Toosal  posed work and aptical depths of all pubsequent reports sew interval, a Form, have been component.  B H2S scaven  T. MIRU pump  Dumped 2 1/2	proximate duration thereoretinent markers and zones thall be filed within 30 day in 3160-4 shall be filed once leted, and the operator has ger down FL.
14. I hereby certify that the foregoing is true and correct Name (Printed Typed)	Tit	le	=:		
HOLLY C. PERKINS		REGULATO	DRY COMPLI		
Mally C. Ferker	g/ Da	ite 7/5/2005	AC	CEPTED FOR	RECORD
// THI	S SPACE FOR FEDERAL	OR STATE OFFI	CE USE	HH 2020	05
Approved by		Title	FADA	Date Date	
Conditions of approval, if any, are attached. Approval of certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations to	those rights in the subject lease	Office	BY_	- HA	Y FICE