

State of New Mexico
Energy, Minerals and Natural Resources Department

Susana Martinez
Governor

David Martin
Cabinet Secretary

Brett F. Woods, Ph.D.
Deputy Cabinet Secretary

Jami Bailey, Division Director
Oil Conservation Division



New Mexico Oil Conservation Division approval and conditions
listed below are made in accordance with OCD Rule 19.15.7.11
and are in addition to the actions approved by BLM on the
following 3160-4 or 3160-5 form.

Operator Signature Date: 9/19/14

Well information:

API WELL #	Well Name	Well #	Operator Name	Type	Stat	County	Surf_Owner	UL	Sec	Twp	N/S	Rng	W/E	Feet	NS	Ft	EW
30-045-21384-00-00	CANYON	008	XTO ENERGY, INC	G	A	San Juan		G	14	25	N	11	W	1650	N	2508	E

Application Type:

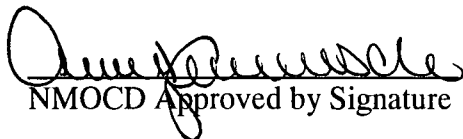
- ☐ P&A ☐ Drilling/Casing Change ☐ Location Change
☐ Recomplete/DHC (For hydraulic fracturing operations review EPA Underground injection control Guidance #84)
☒ Other: RC Mancos/deepen PBTD/PWOP/DHC

Conditions of Approval:

Notify NMOCD 24hrs prior to beginning operations, casing & cement

See APD Conditions of approval regarding Hydraulic Fracturing, Oil base muds and Well-bore communication.

File C104 and completion report for Basin Mancos before returning to production.


NMOCD Approved by Signature

11-7-14
Date

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OIL CONS. DIV. DIST. 3

FORM APPROVED
OMB NO. 1004-0137
Expires July 31, 2010

OCT 22 2014

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an
abandoned well. Use Form 3160-3 (APD) for such proposals.

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on page 2

SEP 19 2014

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NOOC14203616
2. Name of Operator XTO Energy Inc.		6. If Indian, Allottee or Tribe Name NAVAJO
3a. Address 382 CR 3100, AZTEC, NM 87410	3b. Phone No. (include area code) (505) 333-3630	7. If Unit or CA/Agreement, Name and/or No. SWI4282
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1650' FNL & 2508' FEL SWNE SEC.14 (G) -T25N-R11W N.M.P.M.		8. Well Name and No. CANYON #8
		9. API Well No. 30-045-21384
		10. Field and Pool, or Exploratory Area BASIN DAKOTA
		11. County or Parish, State SAN JUAN NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other RC BASIN MC
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	DEEPEN PBTD, PWOP
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	& DHC

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompletable horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletable in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

XTO Energy Inc. proposes to Recomplete this well to the Basin Mancos formation, deepen the PBTD & PWOP per the following:

MIRU PU. MIRU WLU. Perforate Mancos fr/4,928' - 5,180' with a 3-1/8" expendable csg gun (0.36" dia., 25 holes). RIH 5-1/2" packer. Set packer @ +/-4,700'. RDMO PU. Acidize Mancos perms w/1,000 gals of 15% NEFE HCl acid. Frac Mancos perms fr/4,928' - 5,180' with 131,401 gals foam carrying 175,000# 20/40 Brady sand & 25,000# 20/40 RCS. Release Pkr & TOH. Drill out CIBP at 5,250', CO to PBTD @ 6,102'. Continue drillout FC and shoe joint to +/-6,138' (new PBTD). Circ clean. TIH with 2-3/8" tubing to land EOT at +/-6,100'. TIH w/rods & pmp. RDMO.

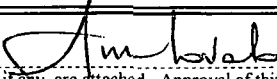
Please see the attached WED, formation tops & Mancos C102 Plat.

An application to DHC will be submitted separately. XTO Energy Inc. will obtain the DHC order before commingling.

ATTACHED TO
FORM 3160-5 OF APPROVAL

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) SHERRY J. MORROW	Title REGULATORY ANALYST
Signature	Date 9/19/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by 	Title Petr. Eng	Date 10/17/14
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

NMOC 14

Formation Tops**Canyon #8**

Fruitland	898'
Pictured Cliffs	1406'
Lewis Shale	1620'
Cliffhouse	2860'
Menefee	2908'
Point Lookout	3855'
Mancos	4070'
Upper Gallup	4722'
Middle Gallup	5072'
Sanastee	5430'
Greenhorn	5796'
Graneros	5852'
Dakota	5894'
Morrison	6121'

District I
1625 N. French Dr., Hobbs, NM 88240

District II
811 South First, Artesia, NM 88210

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

RECEIVED

SEP 19 2014

Farmington Field Office
Bureau of Land Management

Form C-102
Revised October 19, 2009
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-045-21384	² Pool Code 97232	³ Pool Name BASIN MANCOS
⁴ Property Code 22669	⁵ Property Name CANYON	⁶ Well Number #8
⁷ OGRID No. 5380	⁸ Operator Name XTO ENERGY INC.	⁹ Elevation 6490'

¹⁰ Surface Location

UL or lot no. G	Section 14	Township 25N	Range 11W	Lot Idn	Feet from the 1650'	North/South line NORTH	Feet from the 2508'	East/West line EAST	County SAN JUAN
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¹¹ Bottom Hole Location If Different From Surface

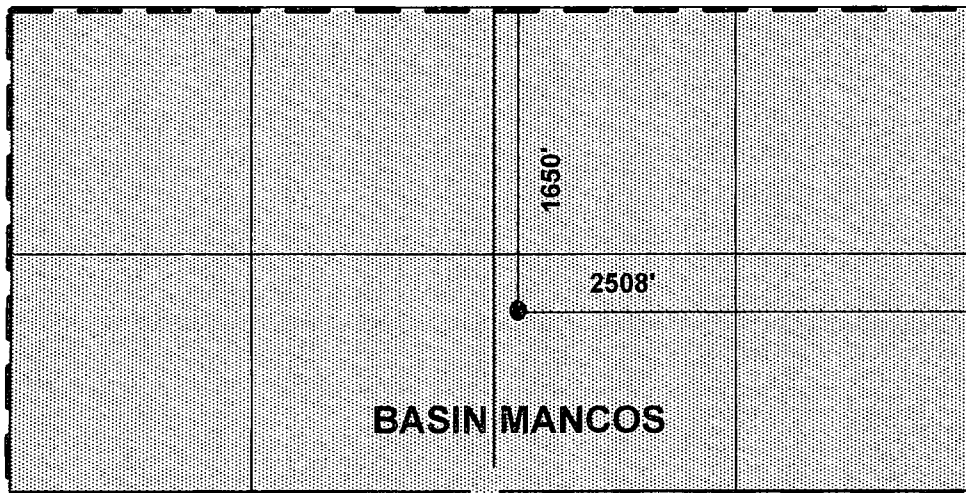
UL or lot no. SAME	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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¹² Dedicated Acres MC: 320 ACRES	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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OIL CONS. DIV DIST. 3

OCT 22 2014

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true & complete to the best of my knowledge & belief and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.
<i>Sherry J. Morrow</i> Signature
Sherry J. Morrow Printed Name
SHERRY J. MORROW Title
REGULATORY ANALYST Title
Date 9/19/2014
¹⁸ SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true & correct to the best of my belief.
6/23/1984 Date of Survey
Original Survey Signed By: John A. Vukonich
14831 Certificate Number

BLM CONDITIONS OF APPROVAL

CASING REPAIR, WORKOVER AND RECOMPLETION OPERATIONS:

- 1. If casing repair operations are needed, obtain prior approval from this office before commencing repairs. If a CBL or other logs are run, provide this office with a copy.**
- 2. After any casing repair operations, test cement squeeze to a minimum of 500# for 30 minutes with no more than 10 % pressure fall off in the 30 minute test period. Provide test chart with your subsequent report of operations**
- 3. A properly functioning BOP and related equipment must be installed prior to commencing workover, casing repair, and/or recompletion operations.**
- 4. Contact this office at (505) 564-7750 prior to conducting any cementing operations: Please contact Jim Lovato @ (505) 320-7378 if casing leaks are identified and a plan of repair is established.**

SPECIAL STIPULATIONS:

- 1. Pits will be fenced during work-over operation.**
- 2. All disturbance will be kept on existing pad.**
- 3. All pits will be pulled and closed immediately upon completion of the recompletion and work-over activities.**
- 4. Pits will be lined with an impervious material at least 12 mils thick.**