Form 3160-5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires March 31, 2007

		Expues Maici	
5.	Lease	Serial No.	

NMSF077383

SUNDRY N	OTICES	AND	REPORTS	ON	WELLS
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Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for guch proposals

6. If Indian, Allottee or Tribe Name

abandoned wen. Ose rom	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
SUBMIT IN TRIPLICATE - 0	7. If Unit or CA/Agreement, Name and/or No.	
1. Type of Well	070 FARMINGTON NM	
Oil Well X Gas Well Other		8. Well Name and No.
2. Name of Operator		DAVIDSON GAS COM G #1G
XTO Energy Inc.		9. API Well No.
3a. Address	3b. Phone No. (include area code)	30-045-33412
2700 Farmington Ave., Bldg. K. Ste		10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey L 860' FNL & 845' FEL SEC 21-T28N-R1		BASIN DAKOTA OTERO CHACRA
		11. County or Parish, State
		SAN JUAN NM
12. CHECK APPROPRIATE	BOX(ES) TO INDICATE NATURE OF NOTICE, F	REPORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACT	ION
Notice of Intent	Acidize Deepen Prod	luction (Start/Resume) Water Shut-Off
	Alter Casing Fracture Treat Recla	amation Well Integrity
X Subsequent Report	Casing Repair New Construction Reco	omplete X Other SET & PT
T rimit Abanda mana Marina	Change Plans Plug and Abandon Tem	porarily Abandon SURF CSG, SET PROD
Final Abandonment Notice	Convert to Injection Plug Back Water	ar Disposal
		CSG
1/2 pps celloflake (15.6 ppg & 1. Tstd OK. Reached driller's TD of 7069' @ 6 Ran 5-1/2", 15.5#, J-55, LT&C csg pps celloflake, 0.5% FL-52 & 2% K pps celloflake & 0.2% FL-52 (14.2)	i, J-55 csg to 409' KB. Cmtd surf csg w/2 18 cuft/sx). Circ 15 bbls cmt to surf. i:00 a.m., 5/23/06. ito 7064' KB. Cmtd lst stage w/370 sx Pr iccl (12.5 ppg & 2.01 cuft/sx) f/b 150 sx T is ppg & 1.54 cuft/sx). Cmtd 2nd stage w/5 1.9 ppg & 2.6 cuft/sx) f/b 100 sx Type II urf. ied upon completion.**	PT csg to 1000 psig f/30 min. em Lite cmt w/0.2% CD-32, 1/2 ype III cmt w/0.3% CD-32, 1/4 20 sx Type III cmt w/8%
14. I hereby certify that the foregoing is true and correct	Title	DIST. 8
Name (Printed/Typed) LORRI D. BINCHAM	REGULATORY COM	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Date 5/12/05	×6.4000
	S SPACE FOR FEDERAL OR STATE OFFICE USE	ACCEPTED FOR RECORD
Approved by	Title	Date JUN 1 6 2006
Conditions of approval, if any, are attached. Approval o certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations the	those rights in the subject lease	FARMANTON FEED OFFICE