Form 3160-5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR BUILD ALL OF LAND MANAGEMENT

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FORM APPROVED ROVD JAN	Td _5	.J. %	,ii
OMB NO. 1004-0137 Expires March 31, 2007 IL CONS	 .	um. ne	• •
Expires March 31 2007/11 CUIS	٦,		U

DIST. S

BUREAU OF LAND MANAGEMENT	Expires Watch 31, 200 F-32
	5. Lease Serial No.
	1

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.

NMNM0498
6. If Indian, Allottee or Tribe Name

Other instructions	RECEIVEI BLM)	7. If Unit or Ca	A/Agreement, Name and/or No.
	BLM 210 FARMINGT		4	
	1. Type of Well BLM		8. Well Name a	
			SCHUMACHER	. #2G
	•		0 ADI Well No	`
XTO Energy Inc. 3a. Address 3b. Phone No. (include area code)		1		
2700 Farmington Ave., Bldg. K. Ste 1 Farmington, 505-324-1090		10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		BASIN DAKOTA		
1-R12W				
845' FSL & 2590' FEL SEC 8"O"-T30N-R12W		11. County or Parish, State		
			SAN JUAN	NM
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA				
TYPE OF ACTION				
Acidize	Deepen	Production	n (Start/Resume)	Water Shut-Off
Alter Casing	Fracture Treat	Reclamati	on	Well Integrity
Casing Repair	New Construction	Recomple	te	X Other SET COMP
al Abandonment Notice Change Plans Plug and Abandon Temporarily Abandon				
Convert to Injecti	on Plug Back	Water Dis	posal	**************************************
lete horizontally, give some or provide the the operation results offices shall be filed offices. wellhead psi,	subsurface locations and meas Bond No. on file with BLM, in a multiple completion or re- nly after all requirements, inc a compressor must l	ured and true ve BIA. Required completion in a luding reclamation in installe	rtical depths of a subsequent repor new interval, a F on, have been co	Ill pertinent markers and zones. ts shall be filed within 30 days orm 3160-4 shall be filed once impleted, and the operator has
	BOX(ES) TO INI Acidize Alter Casing Casing Repair Change Plans Convert to Injecti state all pertinent deta ete horizontally, give sormed or provide the ithe operation results in the operation in the operation.) wellhead psi,	Farmington, 505-324 escription) I-R12W BOX(ES) TO INDICATE NATURE OF N TYP Acidize Deepen Alter Casing Fracture Treat Casing Repair New Construction Change Plans Plug and Abandon Convert to Injection Plug Back state all pertinent details, including estimated startire tet horizontally, give subsurface locations and measormed or provide the Bond No. on file with BLM/ the operation results in a multiple completion or reotices shall be filed only after all requirements, including wellhead psi, a compressor must be	BOX(ES) TO INDICATE NATURE OF NOTICE, REP TYPE OF ACTION Acidize Deepen Production Alter Casing Fracture Treat Reclamatic Casing Repair New Construction Recomple Change Plans Plug and Abandon Temporaric Convert to Injection Plug Back Water Dis state all pertinent details, including estimated starting date of any prete horizontally, give subsurface locations and measured and true vector or provide the Bond No. on file with BLM/BIA. Required the operation results in a multiple completion or recompletion in a otices shall be filed only after all requirements, including reclamatic ion.) wellhead psi, a compressor must be installed.	Sob-324-1090 10. Field and In

1) Installed insulated sound wall w/hospital grade silencer

2) Monitor noise for compliance

The compressor is a Caterpillar 3304, CIP 3-stage recip 65 hp. The nearest house is 1 mile.

14. I hereby certify that the foregoing is true and correct Name (Printed Typed) LORRI D. BINGHAM	Title REGULATORY COMPLIANCE TECH			
And D. Jan	Date 1/10/07			
. THIS SPACE FOR FEDERAL OR STATE OFFICE USE				
Approved by Sue Sies	Title Fram Lead Date			
Conditions of approval, if any, are attached. Approval of this notice does not warrant certify that the applicant holds legal or equitable title to those rights in the subject le which would entitle the applicant to conduct operations thereon.	Of Office			