

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone:(505) 393-6161 Fax:(505) 393-0720

District II

1301 W. Grand Ave., Artesia, NM 88210  
Phone:(505) 748-1283 Fax:(505) 748-9720

District III

1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV

1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico**  
Energy, Minerals and Natural Resources

Form C-140  
Permit 24393  
Revised June 10, 2003

**Oil Conservation Division**  
**1220 S. St Francis Dr.**  
**Santa Fe, NM 87505**  
**(505) 476-3440**

**APPLICATION FOR**  
**WELL WORKOVER PROJECT**

**I. Operator and Well:**

|                                                                                              |         |          |       |                     |                  |                            |                |          |
|----------------------------------------------------------------------------------------------|---------|----------|-------|---------------------|------------------|----------------------------|----------------|----------|
| Operator name & address<br>XTO ENERGY, INC.<br>2700 FARMINGTON AVENUE<br>FARMINGTON NM 87401 |         |          |       |                     |                  | OGRID Number<br>167067     |                |          |
| Contact Party<br>Teena Whiting                                                               |         |          |       |                     |                  | Phone<br>505-566-7916      |                |          |
| Property Name<br>CARSON GAS COM                                                              |         |          |       | Well Number<br>001E |                  | API Number<br>30-045-25508 |                |          |
| UL - Lot                                                                                     | Section | Township | Range | Feet From The       | North/South Line | Feet From The              | East/West Line | County   |
| F                                                                                            | 32      | 30N      | 12W   | 1470                | N                | 1460                       | W              | San Juan |

**II. Workover:**

|                                       |                                                                                |
|---------------------------------------|--------------------------------------------------------------------------------|
| Date Workover Commenced:<br>3/4/2005  | Previous Producing Pool(s) (Prior to Workover):<br>BASIN DAKOTA (PRORATED GAS) |
| Date Workover Completed:<br>4/19/2005 |                                                                                |

III. Attach a description of the Workover Procedures performed to increase production.

IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

III. Attach a description of the Workover Procedures performed to increase production.

**V. Signature:**

|                                                                                                          |                       |                                        |               |                            |           |
|----------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------|---------------|----------------------------|-----------|
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. |                       |                                        |               |                            |           |
| Signature                                                                                                | Electronically Signed | Title                                  | Administrator | Date                       | 2/28/2006 |
| Type or print nameHolly Perkins                                                                          |                       | E-mail addressRegulatory@xtoenergy.com |               | Telephone No. 505-564-6720 |           |

**FOR OIL CONSERVATION DIVISION USE ONLY:**

**VI. CERTIFICATION OF APPROVAL:**

This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on: 4/19/2005

Signature District Supervisor: Charlie Perrin District 3 Date 2/28/2006

VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: 2/28/2006