

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 113713  
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>382 ROAD 3100<br>AZTEC NM 87410 |         |          |       |               |                    |               | OGRID Number<br>5380       |          |
| Contact Party<br>Dee Johnson  |         |          |       |               |                    |               | Phone<br>505-333-3164      |          |
| Property Name<br>FULLERTON FEDERAL 14   |         |          |       |               | Well Number<br>033 |               | API Number<br>30-045-28356 |          |
| UL - Lot  | Section | Township | Range | Feet From The | North/South Line   | Feet From The | East/West Line             | County   |
| J   | 14      | 27N      | 11W   | 2420          | S                  | 1995          | E                          | San Juan |

II. Workover:

|                                       |   |
|---------------------------------------|---|
| Date Workover Commenced:<br>4/27/2009 | Previous Producing Pool(s) (Prior to Workover):<br>BASIN FRUITLAND COAL (GAS) , GALLEGOS FRUITLAND SAND (GAS) , KUTZ<br>PICTURED CLIFFS, WEST (GAS) |
| Date Workover Completed:<br>5/18/2009 |   |

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  | Title          | Date          |  |
| Type or print name   | E-mail address | Telephone No. |  |

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: 5/18/2009

Signature District Supervisor: Charlie Perrin District 3 Date 5/20/2010

VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: 5/20/2010