Form 3160-5 (August 2007)

HOBBS OCD

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

NMOCD Hobbs

FORM APPROVED

OMB NO. 1004-013 Expires: July 31, 201
5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS DEC 0 2 2016 not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals. RECEIVEMIT IN TRIPLICATE - Other instructions on reverse side. 1. Type of Well Oil Well Gas Well Other														
							2. Name of Operator Contact: STEPHANIE RABADUE XTO ENERGY, INC E-Mail: stephanie_rabadue@xtoenergy.com							
								3b. Phone No. (include area code) Ph: 432-620-6714)	10. Field and Pool, or Exploratory EUNICE MONUMENT; GB-SA				
., R., M., or Survey Description,)		11. County or Parish, and State											
Sec #T21S R36E Mer NMP 661FSL 663FWL 3														
ROPRIATE BOX(ES) TO	INDICATE NATURE OF 1	NOTICE, RI	EPORT, OR OTHE	R DATA										
TYPE OF SUBMISSION TYPE OF ACTION														
☐ Acidize ☑ Alter Casing ☐ Casing Repair ☐ Change Plans ☐ Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Reclama Recomp	ation lete arily Abandon	□ Water Shut-Off □ Well Integrity □ Other										
	Contact: E-Mail: stephanie_ Contact: E-Mail: stephanie_ Contact: E-Mail: stephanie_ A. R., M., or Survey Description, Contact: Conta	Contact: STEPHANIE RABADUE E-Mail: stephanie_rabadue@xtoenergy.com 3b. Phone No. (include area code Ph: 432-620-6714 COPRIATE BOX(ES) TO INDICATE NATURE OF ITYPE OF Acidize	PLICATE - Other instructions on reverse side. Ter Contact: STEPHANIE RABADUE E-Mail: stephanie_rabadue@xtoenergy.com 3b. Phone No. (include area code) Ph: 432-620-6714 C. R., M., or Survey Description) 61FSL 663FWL ROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RE TYPE OF ACTION Acidize	7. If Unit or CA/Agreen 8. Well Name and No EUNICE MONUM Contact: STEPHANIE RABADUE E-Mail: stephanie_rabadue@xtoenergy.com 3b. Phone No. (include area code) Ph: 432-620-6714 10. Field and Pool, or EUNICE MONUM C. R., M., or Survey Description) 11. County or Parish, LEA COUNTY, ROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHE TYPE OF ACTION Production (Start/Resume) Acidize										

If the proposal is to deepen directionally or recomplete 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 recompletion 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 site is ready for final inspection.)

7/19/2016: MIRU. POOH w/tbg & rods.
07/20-07/28/2016: CO well. Prep to pull liner. Latched onto liner hanger, POOH & LD. RIH w/pkr. Set @ 3455'. Test csg to 500psi. Good test. Conduct rig repairs. POOH w/pkr. CO well. Assemble Baker Hughes OH swell packer system. RIH. Set liner hanger @ 3451'. Test to 500psi. Good test.
07/29/2016: RIH w/2-7/8" tbg & ESP assembly. Wait for packers to swell.
08/08/2016: Packers fully swollen. Return well to production.

This is record clean-up.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #355847 verifie For XTO ENERGY, IN Committed to AFMSS for processing by	C. sent	to the Hobbs	
Name (Printed/Typed) STEPHANIE RABADUE	Title	REGULATO	RY ANALYST
Signature (Electronic Submission)	Date	10/25/2016	ACCEPTED FOR RECORD
THIS SPACE FOR FEDERA	L OR	STATE OFF	ICE USE
Approved By	Title		Many (D) (Date) M
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		BUREAU OF LAND MANAGEMENT CARLSBAD FIE/D OFFICE

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.