

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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.**

HOBBS OCD

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

MAR 25 2014

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC031740B
2. Name of Operator XTO ENERGY INCORPORATED		6. If Indian, Allottee or Tribe Name
Contact: PATTY R URIAS E-Mail: patty_urias@xtoenergy.com		7. If Unit or CA/Agreement, Name and/or No. 73885U4940 / NM 70948A
3a. Address 200 NORTH LORAIN STREET SUITE 800 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-620-4318 Fx: 432-618-3530	8. Well Name and No. EMSU 238
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 4 T21S R36E NESE 2200FSL 440FEL		9. API Well No. 30-025-04466-00-S1
		10. Field and Pool, or Exploratory EUNICE
		11. County or Parish, and State LEA COUNTY, NM

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Venting and/or Flaring
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat 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 recompleat 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.)

EUNICE MONUMENT SOUTH UNIT SAT #5

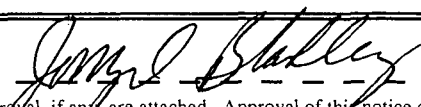
## ASSOCIATED WELLS:

EUNICE MONUMENT SO. UNIT 238 GRBG/SA API #30-025-04466  
EUNICE MONUMENT SO. UNIT 256 GRBG/SA API #30-025-04495  
EUNICE MONUMENT SO. UNIT 260 GRBG/SA API #30-025-04463  
EUNICE MONUMENT SO. UNIT 278 GRBG/SA API #30-025-20133  
EUNICE MONUMENT SO. UNIT 280 GRBG/SA API #30-025-04473  
EUNICE MONUMENT SO. UNIT 282 GRBG/SA API #30-025-21902  
EUNICE MONUMENT SO. UNIT 298 GRBG/SA API #30-025-04575  
EUNICE MONUMENT SO. UNIT 300 GRBG/SA API #30-025-04579

SUBJECT TO LIKE  
APPROVAL BY STATESEE ATTACHED FOR  
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct. Electronic Submission #230931 verified by the BLM Well Information System For XTO ENERGY INCORPORATED, sent to the Hobbs Committed to AFMSS for processing by JERRY BLAKLEY on 02/24/2014 (14JB0103SE)	
Name (Printed/Typed) PATTY R URIAS	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 01/03/2014

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By 	Title	APPROVED MAR 21 2014	Date
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		

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

MSB/OCD 3/26/2014

MAR 26 2014

**Additional data for EC transaction #230931 that would not fit on the form**

**32. Additional remarks, continued**

EUNICE MONUMENT SO. UNIT 319 GRBG/SA API #30-025-04584  
EUNICE MONUMENT SO. UNIT 321 GRBG/SA API #30-025-04570  
EUNICE MONUMENT SO. UNIT 323 GRBG/SA API #30-025-04555  
EUNICE MONUMENT SO. UNIT 623 GRBG/SA API #30-025-35455  
EUNICE MONUMENT SO. UNIT 624 GRBG/SA API #30-025-31408  
EUNICE MONUMENT SO. UNIT 626 GRBG/SA API #30-025-31465  
EUNICE MONUMENT SO. UNIT 628 GRBG/SA API #30-025-37279  
EUNICE MONUMENT SO. UNIT 638 GRBG/SA API #30-025-31426  
EUNICE MONUMENT SO. UNIT 639 GRBG/SA API #30-025-31409  
EUNICE MONUMENT SO. UNIT 640 GRBG/SA API #30-025-34212  
EUNICE MONUMENT SO. UNIT 653 GRBG/SA API #30-025-34213  
EUNICE MONUMENT SO. UNIT 673 GRBG/SA API #30-025-37320  
EUNICE MONUMENT SO. UNIT 676 GRBG/SA API #30-025-35457  
EUNICE MONUMENT SO. UNIT 695 GRBG/SA API #30-025-35162

WE STARTED FLARING 1/2/2014 9:00pm MST APPROX. 60MCFD  
DCP HAVING COMPRESSOR PROBLEMS AT EUNICE PLANT.

BUREAU OF LAND MANAGEMENT  
Carlsbad Field Office  
620 East Greene Street  
Carlsbad, New Mexico 88220  
575-234-5972

<sup>21</sup>  
3/19/2014 Approved subject to Conditions of Approval. JDB

Condition of Approval to Flare Gas

From date of receipt

1. Report all volumes on OGOR reports.
2. Comply with NTL-4A requirements
3. Subject to like approval from NMOCD
4. **Flared volumes will still require payment of royalties**
5. Install gas meter on vent/flare line to measure gas prior to venting/flaring operations if it is not equipped as such at this time. Gas meter to meet all requirements for sale meter as Federal Regulations and Onshore Order #5. Include meter serial number on sundry.
6. This approval does not authorize any additional surface disturbance.
7. Submit updated facility diagram as per Onshore Order #3.
8. Approval not to exceed 90 days for date of approval.
9. Submit Subsequent Report to this sundry with actual volumes of gas flared monthly on 3160-5 (sundry notice).
10. If flaring is still required past 90 days submit new request for approval.
11. If a portable unit is used to flare gas it must be monitored at all times.
12. Comply with any restrictions or regulations when on State or Fee surface.

JDB