

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTCarlsbad Field Office  
FORM APPROVED  
004-0137  
Expires: January 31, 2018

## 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.

SUBMIT IN TRIPLICATE - Other Instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. BIG EDDY UNIT DI 29 BS2-5W 367H
2. Name of Operator XTO PERMIAN OPERATING LLC Contact: KELLY KARDOS E-Mail: kelly_kardos@xtoenergy.com		9. API Well No. 30-025-46542-00-X1
3a. Address 6401 HOLIDAY HILL ROAD, BLDG 5 MIDLAND, TX 79707	3b. Phone No. (include area code) Ph: 432-620-4374	10. Field and Pool or Exploratory Area WILDCAT BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 16 T20S R32E SWSW 390FSL 280FWL 32.567051 N Lat, 103.778931 W Lon		11. County or Parish, State LEA COUNTY, NM

## 12. CHECK THE 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"/> Hydraulic Fracturing	<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original APD
	<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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

XTO Permian Operating, LLC requests permission to make the following changes to the original APD:

Change SHL fr/390'FSL &amp; 280'FWL to 123'FSL &amp; 235'FWL ? No additional surface disturbance.

Change BHL fr/1980 FNL &amp; 50 FWL in Sec. 18-T20S-32E to 660 FNL &amp; 50 FWL in Sec. 19-20S-R32E

Change casing design per the attached drilling program.

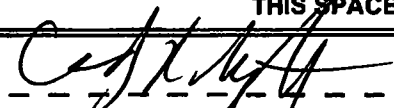
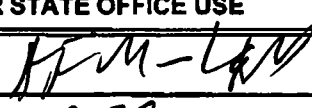

REC'D/MIDLAND

DEC 26 2019

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct. Electronic Submission #495237 verified by the BLM Well Information System For XTO PERMIAN OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by JENNIFER SANCHEZ on 12/10/2019 (20JAS0080SE)	
Name (Printed/Typed) KELLY KARDOS	Title REGULATORY COORDINATOR
Signature (Electronic Submission)	Date 12/10/2019

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By 	Title 	Date 12/18/2019
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

(Instructions on page 2)

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



## PECOS DISTRICT DRILLING CONDITIONS OF APPROVAL

<b>OPERATOR'S NAME:</b>	<b>XTO Permian Operating, LLC</b>
<b>LEASE NO.:</b>	<b>NMNM-0001206A</b>
<b>WELL NAME &amp; NO.:</b>	<b>Big Eddy Unit DI 29 BS2-5W 367H</b>
<b>SURFACE HOLE FOOTAGE:</b>	<b>0123' FSL &amp; 0235' FWL</b>
<b>BOTTOM HOLE FOOTAGE</b>	<b>0660' FNL &amp; 0050' FWL Sec. 19, T. 20 S., R 32 E.</b>
<b>LOCATION:</b>	<b>Section 16, T. 20 S., R 32 E., NMPM</b>
<b>COUNTY:</b>	<b>Lea County, New Mexico</b>

### **Commercial Well Determination**

A commercial well determination shall be submitted after production has been established for at least six months.

### **Unit Wells**

The well sign for a unit well shall include the unit number in addition to the surface and bottom hole lease numbers. This also applies to participating area numbers. If a participating area has not been established, the operator can use the general unit designation, but will replace the unit number with the participating area number when the sign is replaced.

### **A. DRILLING OPERATIONS REQUIREMENTS**

The BLM is to be notified in advance for a representative to witness:

- a. Spudding well (minimum of 24 hours)
- b. Setting and/or Cementing of all casing strings (minimum of 4 hours)
- c. BOPE tests (minimum of 4 hours)

☒ **Eddy County**

Call the Carlsbad Field Office, 620 East Greene St., Carlsbad, NM 88220,  
(575) 361-2822

1. **Hydrogen Sulfide (H<sub>2</sub>S) monitors shall be installed prior to drilling out the surface shoe. If H<sub>2</sub>S is detected in concentrations greater than 100 ppm, the Hydrogen Sulfide area shall meet Onshore Order 6 requirements, which includes equipment and personnel/public protection items. If Hydrogen Sulfide is encountered, provide measured values and formations to the BLM.**
2. Unless the production casing has been run and cemented or the well has been properly plugged, the drilling rig shall not be removed from over the hole without prior approval. **If the drilling rig is removed without approval – an Incident of Non-Compliance will be written and will be a “Major” violation.**

5. The appropriate BLM office shall be notified a minimum of 4 hours in advance for a representative to witness the tests.
- a. In potash areas, for all casing strings utilizing slips, these are to be set as soon as the crew and rig are ready and any fallback cement remediation has been done. For all casing strings, casing cut-off and BOP installation can be initiated at twelve hours after bumping the plug. However, **no tests** shall commence until the cement has had a minimum of 24 hours setup time.
  - b. The tests shall be done by an independent service company utilizing a test plug **not a cup or J-packer**.
  - c. The test shall be run on a 5000 psi chart for a 2-3M BOP/BOP, on a 10000 psi chart for a 5M BOP/BOPE and on a 15000 psi chart for a 10M BOP/BOPE. If a linear chart is used, it shall be a one hour chart. A circular chart shall have a maximum 2 hour clock. If a twelve hour or twenty-four hour chart is used, tester shall make a notation that it is run with a two hour clock.
  - d. The results of the test shall be reported to the appropriate BLM office.
  - e. All tests are required to be recorded on a calibrated test chart. **A copy of the BOP/BOPE test chart and a copy of independent service company test will be submitted to the appropriate BLM office.**
  - f. The BOP/BOPE test shall include a low pressure test from 250 to 300 psi. The test will be held for a minimum of 10 minutes if test is done with a test plug and 30 minutes without a test plug. This test shall be performed prior to the test at full stack pressure.

#### **D. DRILL STEM TEST**

If drill stem tests are performed, Onshore Order 2.III.D shall be followed.

#### **E. WASTE MATERIAL AND FLUIDS**

All waste (i.e. drilling fluids, trash, salts, chemicals, sewage, gray water, etc.) created as a result of drilling operations and completion operations shall be safely contained and disposed of properly at a waste disposal facility. No waste material or fluid shall be disposed of on the well location or surrounding area.

Porto-johns and trash containers will be on-location during fracturing operations or any other crew-intensive operations.

**JAM 121019**

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

District II  
811 S. First St., Artesia, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-9720

District III  
1000 Rio Brazos Road, Aztec, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170

District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis  
Santa Fe, NM 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office  
☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-025-46542	<sup>2</sup> Pool Code 53560	<sup>3</sup> Pool Name SALT LAKE; BONE SPRING
<sup>4</sup> Property Code 726994	<sup>5</sup> Property Name BIG EDDY UNIT 29W VADER	<sup>6</sup> Well Number 104H
<sup>7</sup> OGRID No. 373075	<sup>8</sup> Operator Name XTO PERMIAN OPERATING, LLC.	<sup>9</sup> Elevation 3,516'

<sup>10</sup> Surface Location

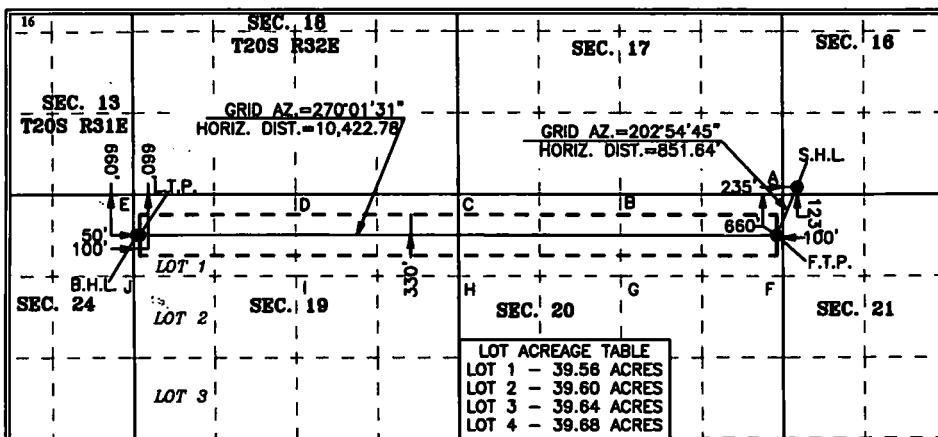
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	16	20 S	32 E		123	SOUTH	235	WEST	LEA

<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
1	19	20 S	32 E		660	NORTH	50	WEST	LEA

<sup>12</sup> Dedicated Acres 319.56	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



<sup>17</sup> OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Kelly Kardos 10/10/19

Signature Date

Kelly Kardos

Printed Name

kelly\_kardos@xtoenergy.com

E-mail Address

<sup>18</sup> SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

11-06-2019

Date of Survey

Signature and Seal of  
Professional Surveyor:

MARK DILLON HARP 23786

Certificate Number



LB

2019072122

Intent ☒ As Drilled ☐

API # 30-025-46542			
Operator Name: XTO PERMIAN OPERATING, LLC		Property Name: BIG EDDY UNIT 29W VADER	Well Number 104H

HOBBS QCD  
FEB 02 2020

Kick Off Point (KOP)

UL M	Section 16	Township 20S	Range 32E	Lot	Feet 123	From N/S SOUTH	Feet 235	From E/W WEST	County LEA
Latitude 32.566317					Longitude -103.779077			NAD 83	

RECEIVED

First Take Point (FTP)

UL A	Section 17	Township 20S	Range 32E	Lot	Feet 660	From N/S NORTH	Feet 100	From E/W EAST	County LEA
Latitude 32.564166					Longitude -103.780166			NAD 83	

Last Take Point (LTP)

UL	Section 19	Township 20S	Range 32E	Lot 1	Feet 660	From N/S NORTH	Feet 100	From E/W WEST	County LEA
Latitude 32.564322					Longitude -103.813834			NAD 83	

Is this well the defining well for the Horizontal Spacing Unit? ☒

Is this well an infill well? ☐

If infill is yes please provide API if available, Operator Name and well number for Defining well for Horizontal Spacing Unit.

API #			
Operator Name: XTO PERMIAN OPERATING, LLC		Property Name:	Well Number

KZ 06/29/2018