

|                                           |                                                                     |                                   |
|-------------------------------------------|---------------------------------------------------------------------|-----------------------------------|
| Well Name: JAMES RANCH UNIT DI 7 SAWTOOTH | Well Location: T23S / R31E / SEC 6 / LOT 1 / 32.34001 / -103.809752 | County or Parish/State: EDDY / NM |
| Well Number: 904H                         | Type of Well: OIL WELL                                              | Allottee or Tribe Name:           |
| Lease Number: NMNM02887A                  | Unit or CA Name: JAMES RANCH UNIT                                   | Unit or CA Number: NMNM70965X     |
| US Well Number: 300155009100X1            | Operator: XTO PERMIAN OPERATING LLC                                 |                                   |

Notice of Intent

Sundry ID: 2792362

|                                                |                              |
|------------------------------------------------|------------------------------|
| Type of Submission: Notice of Intent           | Type of Action: APD Change   |
| Date Sundry Submitted: 05/24/2024              | Time Sundry Submitted: 09:18 |
| Date proposed operation will begin: 05/24/2024 |                              |

**Procedure Description:** XTO Permian Operating, LLC. respectfully requests approval to change the well name, correct the OCD Property Code, update Pool Code and Pool Name and update dedicate acreage effective November 1, 2023. 1. Change the well name: FROM: James Ranch Unit DI 7 Sawtooth 904H TO: James Ranch Unit DI 7 Sawtooth Federal Com 904H 2. Correct OCD Property Code: FROM: 333473 TO: 335858 3. Update Pool Code and Pool Name: 40295 - Los Medanos; Bone Spring 4. Update dedicated acreage to: 799.90 acres Updated C-102 attached

NOI Attachments

Procedure Description

JAMES\_RANCH\_UNIT\_DI\_7\_SAWTOOTH\_FEDERAL\_COM\_904H\_C\_102\_signed\_05\_24\_2024\_20240524091742.pdf

Received by OCD: 5/28/2024 1:29:39 AM

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|                                           |                                                                     |                                   |
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| Lease Number: NMNM02887A                  | Unit or CA Name: JAMES RANCH UNIT                                   | Unit or CA Number: NMNM70965X     |
| US Well Number: 300155009100X1            | Operator: XTO PERMIAN OPERATING LLC                                 |                                   |

Operator

I certify that the foregoing is true and correct. 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. Electronic submission of Sundry Notices through this system satisfies regulations requiring a

Operator Electronic Signature: RANELL (RUSTY) KLEIN

Signed on: MAY 24, 2024 09:17 AM

Name: XTO PERMIAN OPERATING LLC

Title: Regulatory Analyst

Street Address: 6401 HOLIDAY HILL ROAD BLDG 5

City: MIDLANDState: TX

Phone: (432) 620-6700

Email address: RANELL.KLEIN@EXXONMOBIL.COM

Field

Representative Name:

Street Address:

City:State:Zip:

Phone:

Email address:

BLM Point of Contact

BLM POC Name: ZOTA M STEVENS

BLM POC Title: Petroleum Engineer

BLM POC Phone: 5752345998

BLM POC Email Address: ZSTEVENS@BLM.GOV

Disposition: Approved

Disposition Date: 05/24/2024

Signature: Zota Stevens

|                                                                                                                                                                              |                                                                          |                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-----------------------------------------------------------------|
| Form 3160-5<br>(June 2019)                                                                                                                                                   | UNITED STATES<br>DEPARTMENT OF THE INTERIOR<br>BUREAU OF LAND MANAGEMENT | FORM APPROVED<br>OMB No. 1004-0137<br>Expires: October 31, 2021 |
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br><i>Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.</i> |                                                                          | 5. Lease Serial No.                                             |
|                                                                                                                                                                              |                                                                          | 6. If Indian, Allottee or Tribe Name                            |

|                                                                                                                       |                                   |                                             |
|-----------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------------------|
| <b>SUBMIT IN TRIPLICATE</b> - Other instructions on page 2                                                            |                                   | 7. If Unit of CA/Agreement, Name and/or No. |
| 1. Type of Well<br><input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other |                                   | 8. Well Name and No.                        |
| 2. Name of Operator                                                                                                   |                                   | 9. API Well No.                             |
| 3a. Address                                                                                                           | 3b. Phone No. (include area code) | 10. Field and Pool or Exploratory Area      |
| 4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)                                                  |                                   | 11. Country or Parish, State                |

|                                                                                      |                                               |                                               |                                                    |                                         |
|--------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------|----------------------------------------------------|-----------------------------------------|
| 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA |                                               |                                               |                                                    |                                         |
| TYPE OF SUBMISSION                                                                   | TYPE OF ACTION                                |                                               |                                                    |                                         |
| <input 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 type="checkbox"/> Other          |
|                                                                                      | <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 recompleate 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 perfonned 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 recompletion 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 detennined that the site is ready for final inspection.)

|                                                                                   |       |  |
|-----------------------------------------------------------------------------------|-------|--|
| 14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) |       |  |
|                                                                                   | Title |  |
| Signature                                                                         | Date  |  |

|                                                                                                                                                                                                                                                           |        |      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|------|
| <b>THE SPACE FOR FEDERAL OR STATE OFFICE USE</b>                                                                                                                                                                                                          |        |      |
| Approved by                                                                                                                                                                                                                                               | Title  | 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.

(Instructions on page 2)

## GENERAL INSTRUCTIONS

This form is designed for submitting proposals to perform certain well operations and reports of such operations when completed as indicated on Federal and Indian lands pursuant to applicable Federal law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local area or regional procedures and practices, are either shown below, will be issued by or may be obtained from the local Federal office.

## SPECIFIC INSTRUCTIONS

*Item 4* - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

*Item 13*: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by the local Federal office. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to the top of any tubing left in the hole; method of closing top of well and date well site conditioned for final inspection looking for approval of the abandonment. If the proposal will involve **hydraulic fracturing operations**, you must comply with 43 CFR 3162.3-3, including providing information about the protection of usable water. Operators should provide the best available information about all formations containing water and their depths. This information could include data and interpretation of resistivity logs run on nearby wells. Information may also be obtained from state or tribal regulatory agencies and from local BLM offices.

## NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

EFFECT OF NOT PROVIDING THE INFORMATION: Filing of this notice and report and disclosure of the information is mandatory for those subsequent well operations specified in 43 CFR 3162.3-2, 3162.3-3, 3162.3-4.

The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

Response to this request is mandatory.

The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

**BURDEN HOURS STATEMENT:** Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C St., N.W., Mail Stop 401 LS, Washington, D.C. 20240

## Additional Information

### Location of Well

0. SHL: LOT 1 / 155 FNL / 350 FEL / TWSP: 23S / RANGE: 31E / SECTION: 6 / LAT: 32.34001 / LONG: -103.809752 ( TVD: 0 feet, MD: 0 feet )

PPP: LOT 1 / 330 FNL / 1650 FWL / TWSP: 23S / RANGE: 31E / SECTION: 6 / LAT: 32.338004 / LONG: -103.811655 ( TVD: 11068 feet, MD: 11652 feet )

PPP: SENE / 1319 FNL / 1649 FWL / TWSP: 23S / RANGE: 31E / SECTION: 7 / LAT: 32.32112 / LONG: -103.81068 ( TVD: 11068 feet, MD: 17252 feet )

PPP: SESE / 189 FNL / 0 FWL / TWSP: 23S / RANGE: 31E / SECTION: 6 / LAT: 32.32808 / LONG: -103.81068 ( TVD: 11068 feet, MD: 14612 feet )

BHL: SENE / 2590 FNL / 2090 FWL / TWSP: 23S / RANGE: 31E / SECTION: 17 / LAT: 32.304884 / LONG: -103.811591 ( TVD: 11068 feet, MD: 23462 feet )

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 Dr.  
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

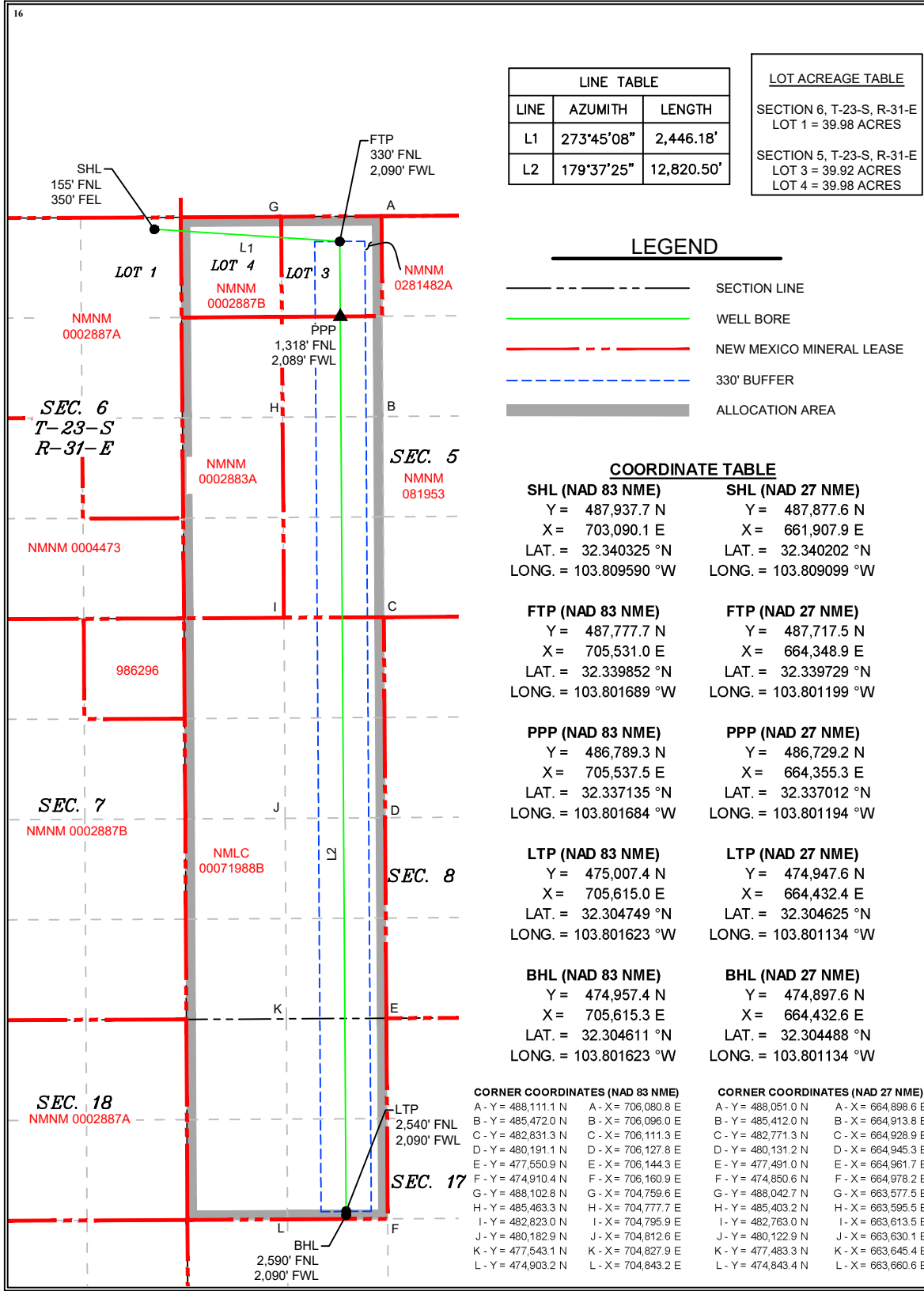
|                                                |                                                                                 |                                                           |
|------------------------------------------------|---------------------------------------------------------------------------------|-----------------------------------------------------------|
| <sup>1</sup> API Number<br><b>30-015-50091</b> | <sup>2</sup> Pool Code<br><b>40295</b>                                          | <sup>3</sup> Pool Name<br><b>LOS MEDANOS; BONE SPRING</b> |
| <sup>4</sup> Property Code<br><b>335858</b>    | <sup>5</sup> Property Name<br><b>JAMES RANCH UNIT DI 7 SAWTOOTH FEDERAL COM</b> | <sup>6</sup> Well Number<br><b>904H</b>                   |
| <sup>7</sup> OGRID No.<br><b>373075</b>        | <sup>8</sup> Operator Name<br><b>XTO PERMIAN OPERATING, LLC</b>                 | <sup>9</sup> Elevation<br><b>3,329'</b>                   |

|                                |                     |                         |                      |         |                             |                                  |                             |                               |                       |
|--------------------------------|---------------------|-------------------------|----------------------|---------|-----------------------------|----------------------------------|-----------------------------|-------------------------------|-----------------------|
| <sup>10</sup> Surface Location |                     |                         |                      |         |                             |                                  |                             |                               |                       |
| UL or lot no.<br><b>1</b>      | Section<br><b>6</b> | Township<br><b>23 S</b> | Range<br><b>31 E</b> | Lot Idn | Feet from the<br><b>155</b> | North/South line<br><b>NORTH</b> | Feet from the<br><b>350</b> | East/West line<br><b>EAST</b> | County<br><b>EDDY</b> |

|                                                              |                      |                         |                      |         |                               |                                  |                               |                               |                       |
|--------------------------------------------------------------|----------------------|-------------------------|----------------------|---------|-------------------------------|----------------------------------|-------------------------------|-------------------------------|-----------------------|
| <sup>11</sup> Bottom Hole Location If Different From Surface |                      |                         |                      |         |                               |                                  |                               |                               |                       |
| UL or lot no.<br><b>F</b>                                    | Section<br><b>17</b> | Township<br><b>23 S</b> | Range<br><b>31 E</b> | Lot Idn | Feet from the<br><b>2,590</b> | North/South line<br><b>NORTH</b> | Feet from the<br><b>2,090</b> | East/West line<br><b>WEST</b> | County<br><b>EDDY</b> |

|                                                |                               |                                  |                         |
|------------------------------------------------|-------------------------------|----------------------------------|-------------------------|
| <sup>12</sup> Dedicated Acres<br><b>799.90</b> | <sup>13</sup> Joint or Infill | <sup>14</sup> Consolidation Code | <sup>15</sup> Order No. |
|------------------------------------------------|-------------------------------|----------------------------------|-------------------------|

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.



**17 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.

*Rusty Klein* 5-24-2024  
Signature Date

RUSTY KLEIN  
Printed Name

ranell.klein@exxonmobil.com  
E-mail Address

**18 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.

5/23/2024  
Date of Survey

Signature and Seal of Professional Surveyor:

PRELIMINARY, THIS DOCUMENT SHALL NOT BE RECORDED FOR ANY PURPOSE AND SHALL NOT BE USED OR VIEWED OR RELIED UPON AS A FINAL SURVEY DOCUMENT

MARK DILLON HARP 23786  
Certificate Number

DB 618.013002.06-08

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720  
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**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  
Oil Conservation Division  
1220 S. St Francis Dr.  
Santa Fe, NM 87505

CONDITIONS

Action 348105

CONDITIONS

|                                                                                        |                                                      |
|----------------------------------------------------------------------------------------|------------------------------------------------------|
| Operator:<br>XTO PERMIAN OPERATING LLC.<br>6401 HOLIDAY HILL ROAD<br>MIDLAND, TX 79707 | OGRID:<br>373075                                     |
|                                                                                        | Action Number:<br>348105                             |
|                                                                                        | Action Type:<br>[C-103] NOI Change of Plans (C-103A) |

CONDITIONS

| Created By  | Condition                                                                                                                               | Condition Date |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------|----------------|
| ward.rikala | All original COA's still apply. Additionally, if cement is not circulated to surface during cementing operations,then a CBL is required | 9/11/2024      |