<u>District I</u>
1625 N. French Drive, Hobbs, NM 88240
<u>District II</u>
811 S. First St., Artesia, NM 88210
<u>District III</u>
1000 Rio Brazos Road, Aztec, NM 87410
<u>District IV</u>

1220 S. St Francis Dr, Santa Fe, NM 87505 State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-107-B Revised August 1, 2011

OIL CONSERVATION DIVISION

1220 S. St Francis Drive Santa Fe, New Mexico 87505 Submit the original application to the Santa Fe office with one copy to the appropriate District Office.

APPLIC	ATION FOR SURF	ACE COMM	INGLING	G (DIVERSE	OWNERSHIP)		
OPERATOR NAME: XTO PERMIAN OPERATING LLC							
OPERATOR ADDRESS: 6401 HOLIDAY HILL ROAD, BLDG 5 MIDLAND, TX 79707							
APPLICATION TYPE:							
□ Pool Commingling □ Lease Commingling □ Pool and Lease Commingling □ Off-Lease Storage and Measurement (Only if not Surface Commingled)							
LEASE TYPE: Fee State Federal							
Is this an Amendment to existing Order? Yes No If "Yes", please include the appropriate Order No. Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling							
Yes No	anagement (BEWI) and St	ate Land Office (5	sec) been not	inica in writing o	i the proposed comm	mgmg	
(A) POOL COMMINGLING							
Please attach sheets with the following information							
(1) Pool Names and Codes	Gravities / B7 Non-Commir Production	gled BTU of	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes	
Poker Lake; Delaware, NW (96	6046)						
Poker Lake; Delaware, SW (96	047)						
(2) Are any wells producing at top allowables? Yes No							
 (3) Has all interest owners been notified by certified mail of the proposed commingling? (4) Measurement type: ☐ Metering ☐ Other (Specify) ALLOCATION BY TEST 							
(4) Measurement type: \square Metering \square Other (specify) ALLOCATION BY LEST (5) Will commingling decrease the value of production? \square Yes \square No If "yes", describe why commingling should be approved							
(B) LEASE COMMINGLING							
Please attach sheets with the following information							
(1) Pool Name and Code.							
 (2) Is all production from same source of supply? ☐Yes ☐No (3) Has all interest owners been notified by certified mail of the proposed commingling? ☐Yes ☐No 							
(4) Measurement type: Metering Other (Specify)							
L							
	(C) PO	OI and LEASE	COMMIN	CLING			
(C) POOL and LEASE COMMINGLING Please attach sheets with the following information							
(1) Complete Sections A and E.							
	(D) OFF I F	ACE CTODACI	E and MEA	CUDEMENT			
(D) OFF-LEASE STORAGE and MEASUREMENT Please attached sheets with the following information							
(1) Is all production from same source of supply? \[\subsetence \text{Yes} \] \[\subsetence \text{No} \]							
(2) Include proof of notice to							
Γ							
(E) ADDITIONAL INFORMATION (for all application types) Please attach sheets with the following information							
(1) A schematic diagram of facility, including legal location.							
(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.							
(3) Lease Names, Lease and	(3) Lease Names, Lease and Well Numbers, and API Numbers.						
I hereby certify that the information	tion above is true and compl	ete to the best of my	y knowledge an	d belief.			

TITLE: Regulatory Advisor

DATE: 5/13/2020

TYPE OR PRINT NAME: Chase Hare TELEPHONE NO.: 724-549-9903

SIGNATURE: