

PNRM 0723454385

C-103 Received 8-20-2007

DHC No. Assigned 8-21-2007

Order Number	API Number	Operator	County			
HOB-0212	30-025-38088	XTO Energy, Inc.	Lea			
Order Date	Well Name	Number	Location			
	SDE 31 Federal	017	G	31	235	32E
			UL	Sec	T (+Dir)	R (+Dir)
Pool 1	Order Number	Well Name	Oil %	Gas %		
	59945	Triste Draw Delaware, W	89%	27%		
Pool 2	Order Number	Well Name	Oil %	Gas %		
	53805	Sand Dunes Bone Spring, S,	11%	73%		
Pool 3	Order Number	Well Name	Oil %	Gas %		
Pool 4	Order Number	Well Name	Oil %	Gas %		
Comments: Work completed effective _____ Work cancelled effective _____						

Posted to
RBM &
8-22-2007 B

30-025-38088
HOB-0212

DOWNHOLE COMMINGLE CALCULATIONS:

OPERATOR: XTO Energy Inc.

PROPERTY NAME: SDE 31 Federal

WNULSTR: 17-G; 31-23-32

SECTION I:		ALLOWABLE AMOUNT	
59945	POOL NO. 1 <u>Triste Draw Delaware, West</u>	<u>187</u>	<u>374</u> MCF 2000
53805	POOL NO. 2 <u>Sand Dunes Bone Spring, South</u>	<u>365</u>	<u>730</u> MCF 2000
	POOL NO. 3 _____	_____	_____ MCF
	POOL NO. 4 _____	_____	_____ MCF
		<u>552</u>	<u>1104</u>

SECTION II:		Oil	Gas
POOL NO. 1	<u>Triste Draw Delaware, West</u>	<u>89%</u>	<u>27%</u>
POOL NO. 2	<u>Sand Dunes Bone Spring, South</u>	<u>11%</u>	<u>73%</u>
POOL NO. 3	_____		
POOL NO. 4	_____		

	<u>OIL</u>	<u>GAS</u>
SECTION III:	<u>187 ÷ 89% = 210.112 (211)</u>	_____
SECTION IV:	<u>211 × 89% = 187.79 (188)</u>	_____
	<u>211 × 11% = 23.21 (23)</u>	_____
	_____	_____
	_____	_____

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 1000 Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-38088
5. Indicate Type of Lease <i>Federal</i> STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
 Oil Well Gas Well Other

2. Name of Operator
 XTO Energy, Inc. *26 2007*
 OCD-ARTESIA

3. Address of Operator
 200 N. Loraine, Ste. 800 Midland, TX 79701

4. Well Location
 Unit Letter G : 1900' feet from the North line and 2310' feet from the East line
 Section 31 Township 23S Range 32E NMPM County Lea

7. Lease Name or Unit Agreement Name:
 SDE 31 Federal

8. Well Number
 17

9. OGRID Number
 005380

10. Pool name or Wildcat
 Triste Draw W; Sand Dunes; Bone Sp. So

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK PLUG AND ABANDON

TEMPORARILY ABANDON CHANGE PLANS

PULL OR ALTER CASING MULTIPLE COMPLETION

OTHER: _____ DHC

SUBSEQUENT REPORT OF:

REMEDIAL WORK ALTERING CASING

COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT

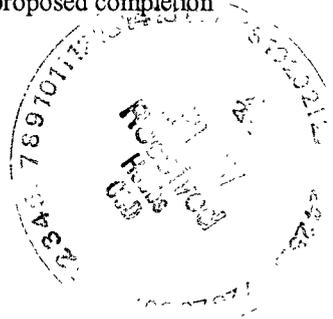
CASING TEST AND CEMENT JOB

OTHER: Reactivate Bone Spring, Add Pay in Delaware

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- Division Order No. R11363
- Pools: Triste Draw; Delaware West (59945) & Sand Dunes; Bone Spring, South (53805)
- Delaware Perfs: 7240'-8307' & Bone Spring Perfs: 8620'-8635'
- Allocations based on Well Tests (prior to well being downhole commingled).
 Bone Spring - 11% Oil, 73% Gas, 2% Water
 Delaware - 89% Oil, 27% Gas, 98% Water

DHC Order No. HOB-0212



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan

SIGNATURE Kristy Ward TITLE Regulatory Analyst DATE 07/24/07
 E-mail address: kristy_ward@xtoenergy.com
 Telephone No. 432-620-6740

For State Use Only

APPROVED BY Chris Williams TITLE OCD DISTRICT SUPERVISOR/GENERAL MANAGER DATE AUG 21 2007

Conditions of Approval, if any:

