

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: November 30, 2000

**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.**

5. Lease Serial No.  
NMNM05791

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

8. Well Name and No.  
DAWSON A 1F

2. Name of Operator  
XTO ENERGY INC

Contact: HOLLY PERKINS  
E-Mail: Regulatory@xtoenergy.com

9. API Well No.  
30-045-31123-00-S1

3a. Address  
2700 FARMINGTON AVE., BLDG K, SUITE 1  
FARMINGTON, NM 87401

3b. Phone No. (include area code)  
Ph: 505.324.1090 Ext: 4020  
Fx: 505.564.6700

10. Field and Pool, or Exploratory  
WILDCAT BASIN MANCOS

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 4 T27N R8W SENW 1865FNL 1565FWL

11. County or Parish, and State

SAN JUAN 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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Subsurface Commingling
	<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.)

XTO Energy Inc. proposes to recompleat this well in the Wildcat Basin Mancos. The Basin Dakota will be SI to test the Mancos for future downhole commingling.

**CONDITIONS OF APPROVAL**  
Adhere to previously issued stipulations.



DNC 923 AZ

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #19604 verified by the BLM Well Information System  
For XTO ENERGY INC, sent to the Farmington  
Committed to AFMSS for processing by Matthew Halbert on 03/20/2003 (03MXH0618SE)

Name (Printed/Typed) DARRIN STEED

Title OPERATIONS ENGINEER

Signature (Electronic Submission)

Date 03/17/2003

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

/s/ Jim Lovato

Title

MAR 24 2003

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.

**\*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\***

NMOCU

✓

DISTRICT I  
1625 N. French Dr., Hobbs, N.M. 88240

DISTRICT II  
811 South First, Artesia, N.M. 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, N.M. 87410

DISTRICT IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources Department

Form C-102  
Revised August 15, 2000

Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

OIL CONSERVATION DIVISION

2040 South Pacheco  
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-045-31123	<sup>2</sup> Pool Code 97232	<sup>3</sup> Pool Name WILDCAT BASIN MANCOS
<sup>4</sup> Property Code	<sup>5</sup> Property Name DAWSON "A"	<sup>6</sup> Well Number 1F
<sup>7</sup> GRID No. 167067	<sup>8</sup> Operator Name XTO ENERGY INC.	<sup>9</sup> Elevation 6345'

<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
F	4	27-N	8-W		1865'	NORTH	1565'	WEST	SAN JUAN

<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
<sup>12</sup> Dedicated Acres 160 NW/4					<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

<sup>16</sup> FD BC G.L.O. 1916 S 89-27-24 E 2642.5' (M) FD BC G.L.O. 1916 5386.0' (M) 1865' 244' 503' 1078' 1565' 832' 4 LAT: 36°36'22" N. LONG: 107°41'23" W.	<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.  Darrin Steed Signature DARRIN STEED Printed Name REGULATORY SUPERVISOR Title March 14, 2003 Date  <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.  OCT. Date of Survey Signature and Seal of Professional Surveyor 14827 Certificate Number
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