

State of New Mexico  
Energy, Minerals and Natural Resources Department

**Susana Martinez**  
Governor

**David Martin**  
Cabinet Secretary

**Brett F. Woods, Ph.D.**  
Deputy Cabinet Secretary

**Jami Bailey, Division Director**  
Oil Conservation Division



New Mexico Oil Conservation Division approval and conditions listed below are made in accordance with OCD Rule 19.15.7.11 and are in addition to the actions approved by BLM on the following 3160-4 or 3160-5 form.

Operator Signature Date: 9/19/14

Well information:

API WELL #	Well Name	Well #	Operator Name	Type	Stat	County	Surf_Owner	UL	Sec	Twp	N/S	Rng	W/E	Feet	NS	Ft	EW
30-045-21499-00-00	CANYON	012	XTO ENERGY, INC	G	A	San Juan	I	A	13	25	N	11	W	1000	N	1060	E

Application Type:

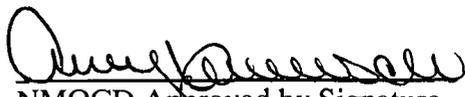
- P&A   
  Drilling/Casing Change   
  Location Change  
 Recomplete/DHC (For hydraulic fracturing operations review EPA Underground injection control Guidance #84)  
 Other: RC Mancos/deepen PBTD/PWOP/DHC

Conditions of Approval:

**Notify NMOCD 24hrs prior to beginning operations, casing & cement**

**See APD Conditions of approval regarding Hydraulic Fracturing, Oil base muds and Well-bore communication.**

**File C104 and completion report for Basin Mancos before returning to production.**

  
NMOCD Approved by Signature

11-7-14  
Date

OCT 22 2014

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

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SEP 19 2014

5. Lease Serial No. 3612  
NOOC14203616

6. If Indian, Allottee or Tribe Name  
NAVAJO

7. If Unit or CA/Agreement, Name and/or No.  
SWI4282

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
XTO Energy Inc.

3a. Address  
382 CR 3100, AZTEC, NM 87410

3b. Phone No. (include area code)  
(505) 333-3630

8. Well Name and No.  
CANYON #12

9. API Well No.  
30-045-21499

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
1000' FNL & 1060' FEL NENE SEC.13 (A) -T25N-R11W N.M.P.M.

10. Field and Pool, or Exploratory Area  
BASIN DAKOTA

11. County or Parish, State  
SAN JUAN 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 checked="" type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>RC BASIN MC</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>DEEPEN PBTD, FWOP</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	<u>&amp; DHC</u>

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 recomplete 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 recompletion 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 final site is ready for final inspection.)

XTO Energy Inc. proposes to Recomplete this well to the Basin Mancos formation, deepen the PBTD & FWOP per the following:

MIRU PU. MIRU WLU. Perforate Mancos fr/5,049' - 5,211' with a 3-1/8" expendable csg gun (0.36" dia., 30 holes). RIH 5-1/2" packer. Set packer @ +/-4,700'. RDMO PU. Acidize Mancos perms w/1,000 gals of 15% NEFE HCl acid. Frac Mancos perms fr/5,049' - 5,211' with 131,280 gals foam carrying 175,000# 20/40 Brady sand & 25,000# 20/40 RCS. Release Pkr & TOH. Drill out CIBP at 5,350', CO to PBTD @ 6,128'. Continue drillout FC and shoe joint to +/-6,160' (new PBTD). Circ wellbore clean. TIH with 2-3/8" tubing to land EOT at +/-6,130'. TIH w/rods & pmp. RDMO.

Please see the attached WED, formation tops & Mancos C102 Plat.

An application to DHC will be submitted separately. XTO Energy Inc. will obtain the DHC order before commingling.

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) <u>SHERRY J. MORROW</u>	Title <u>REGULATORY ANALYST</u>
Signature	Date <u>9/19/2014</u>

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by 	Title <u>Petr. Eng</u>	Date <u>10/17/14</u>
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	

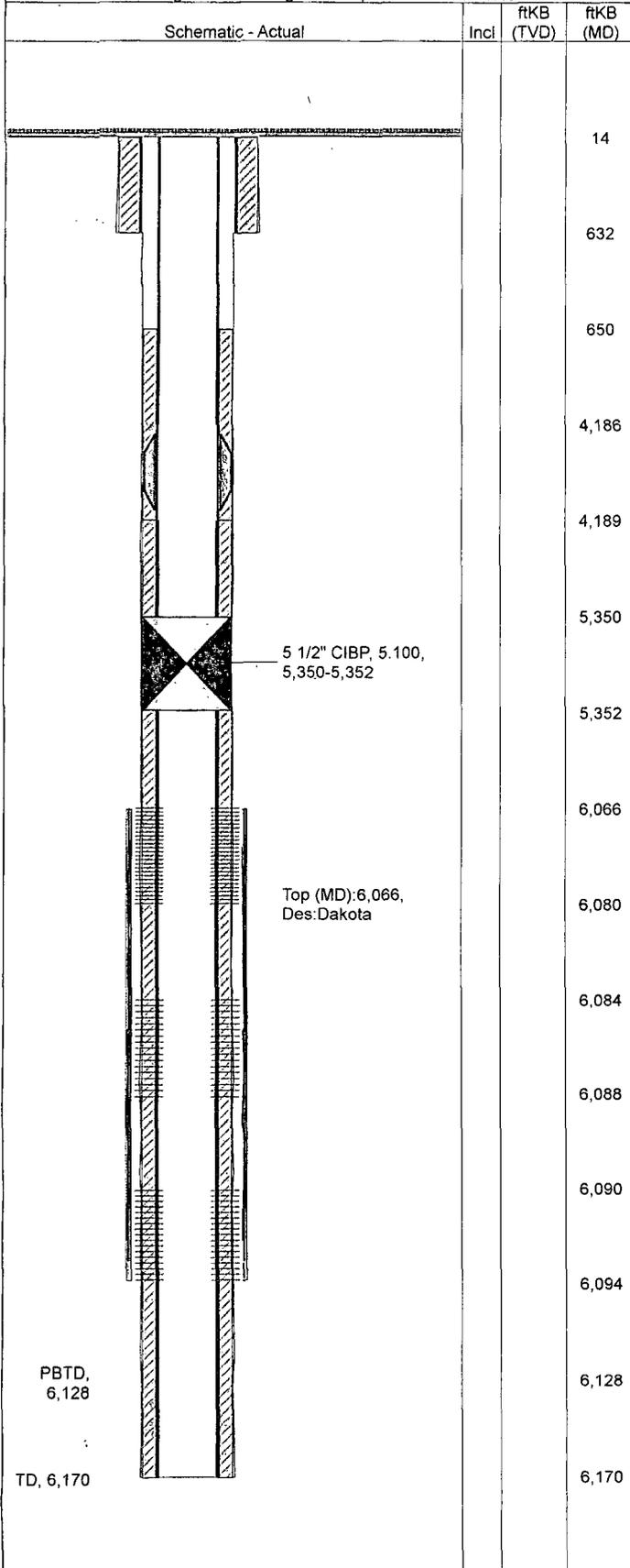


# XTO - Wellbore Diagram

**Well Name: Canyon 12**

API/UWI 30045214990000	E/W Dist (ft) 1,060.0	E/W Ref FEL	N/S Dist (ft) 1,000.0	N/S Ref FNL	Location T25N-R11W-S13	Field Name Basin Dakota	County San Juan	State/Province New Mexico
Well Configuration Type Vertical	XTO ID B 70131	Orig KB Elev (ft) 6,503.00	Gr Elev (ft) 6,489.00	KB-Grd (ft) 14.00	Spud Date 7/19/1974	PBTD (All) (ftKB) Original Hole - 6128.0	Total Depth (ftKB) 6,170.0	Method Of Production Plunger Lift

Well Config: Vertical - Original Hole, 9/17/2014 10:53:49 AM



Zones		
Zone	Top (ftKB)	Btm (ftKB)
Dakota	6,066.0	6,094.0

Casing Strings					
Casing Description	OD (in)	Wt (lbs/ft)	String Grade	Top Connection	Set Depth (ftK)
Surface	8 5/8	24.00	K-55		632.0
Production	5 1/2	15.50	K-55		6,170.0
Item Description	OD (in)	Wt (lbs/ft)	Grade	Top (ftKB)	Bottom (ftKB)
DV Tool	5 1/2			4,186.0	4,189.0

Cement		
Description	Type	String
Surface Casing Cement	casing	Surface, 632.0ftKB
Comment		
Cmt'd w/325 sx CL A Cmt w/2% CaCl2. Circ Cmt to Surf.		
Description	Type	String
Production Casing Cement	casing	Production, 6,170.0ftKB
Comment		
Cmt'd w/650 sx CL A Lo Dense Cmt f/b 150 sx CL A Neat in two stgs. TOC 650' by TS.		

Perforations							
Date	Top (ftKB)	Btm (ftKB)	Shot Dens (shots/ft)	Hole Diameter (in)	Phasing (°)	Curr... Status	Zone
8/23/1974	6,066.0	6,080.0	2.0				Dakota
8/23/1974	6,084.0	6,088.0	2.0				Dakota
8/23/1974	6,090.0	6,094.0	2.0				Dakota

Stimulations & Treatments								
Frac Start Date	Top Perf (ft...)	Bottom Pe...	V (slurry) (...)	Total Prop...	AIR (b...	ATP (psi)	MTP (psi)	ISIP (psi)
8/23/1974	6066	6094		60,000.0	17	450.0		2,400.0
Comment								
Frac DK w/49,518 Gals Pillar Frac & 50,000# 20/40 SD & 10,000# 10/20 SD @ 17 BPM & ATP 4,500 PSIG. ISIP 2,400 PSIG. 15" SIP 2,200 PSIG.								

OIL CONS. DIV DIST. 3

OCT 22 2014

**Formation Tops**

**Canyon #12**

Fruitland	991'
Pictured Cliffs	1494'
Lewis Shale	1701'
Cliffhouse	3007'
Menefee	3042'
Point Lookout	3991'
Mancos	4181'
Upper Gallup	4855'
Middle Gallup	5192'
Sanastee	5551'
Greenhorn	5902'
Graneros	5956'
Dakota	5995'

State of New Mexico

Energy, Minerals & Natural Resources Department

Form C-102

Revised October 19, 2009

Submit one copy to appropriate

District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

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SEP 19 2014

Farmington Field Office  
Bureau of Land Management

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-045-21499	<sup>2</sup> Pool Code 97232	<sup>3</sup> Pool Name BASIN MANCOS
<sup>4</sup> Property Code 22669	<sup>5</sup> Property Name CANYON	
<sup>7</sup> OGRID No. 5380	<sup>8</sup> Operator Name XTO ENERGY INC.	<sup>6</sup> Well Number #12
		<sup>9</sup> Elevation 6494'

<sup>10</sup> Surface Location

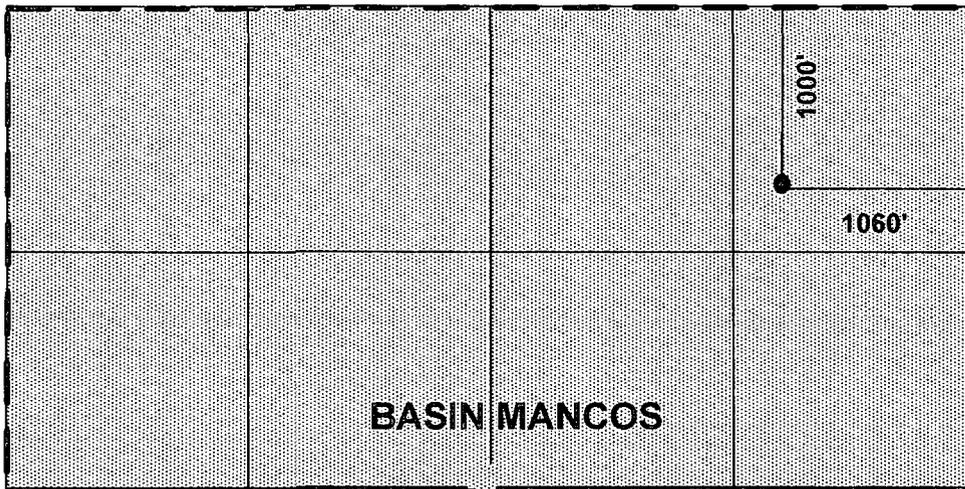
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	13	25N	11W		1000'	NORTH	1060'	EAST	SAN JUAN

<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
SAME									

<sup>12</sup> Dedicated Acres MC: 320 ACRES	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.	<b>OIL CONS. DIV DIST. 3</b>
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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 & complete to the best of my knowledge & 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.

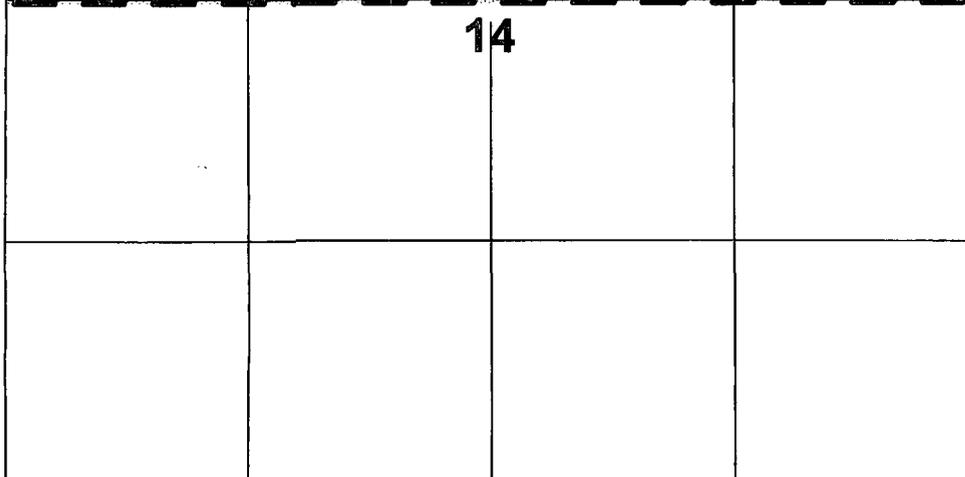
*Sherry J. Morrow*  
Signature

Sherry J. Morrow  
Printed Name

SHERRY J. MORROW  
Title

REGULATORY ANALYST  
Title

Date  
9/19/2014



<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 & correct to the best of my belief.

6/23/1984  
Date of Survey

Original Survey Signed By:  
John A. Vukonich

14831  
Certificate Number

## **BLM CONDITIONS OF APPROVAL**

### ***CASING REPAIR, WORKOVER AND RECOMPLETION OPERATIONS:***

- 1. If casing repair operations are needed, obtain prior approval from this office before commencing repairs. If a CBL or other logs are run, provide this office with a copy.**
- 2. After any casing repair operations, test cement squeeze to a minimum of 500# for 30 minutes with no more than 10 % pressure fall off in the 30 minute test period. Provide test chart with your subsequent report of operations**
- 3. A properly functioning BOP and related equipment must be installed prior to commencing workover, casing repair, and/or recompletion operations.**
- 4. Contact this office at (505) 564-7750 prior to conducting any cementing operations: Please contact Jim Lovato @ (505) 320-7378 if casing leaks are identified and a plan of repair is established.**

### ***SPECIAL STIPULATIONS:***

- 1. Pits will be fenced during work-over operation.**
- 2. All disturbance will be kept on existing pad.**
- 3. All pits will be pulled and closed immediately upon completion of the recompletion and work-over activities.**
- 4. Pits will be lined with an impervious material at least 12 mils thick.**