Form C-103 State of New Mexico Submit 3 Copies To Appropriate District Office Energy, Minerals and Natural Resources May 27, 2004 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 RCVD DEQ 30-045-22765 District II OIL CONSERVATION DIVISION IIIL CURL 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE FEE DIST. 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A STATE GAS COM M DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well . Gas Well X Other 9. OGRID Number 2. Name of Operator XTO Energy Inc. 5380 10. Pool name or Wildcat 3. Address of Operator 2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401 BLANCO MESAVERDE 4. Well Location 1460 SOUTH 1045 __ feet from the_ Unit Letter feet from the line and line Township 31N Range San Juan 16 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6099' GL 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: Below-Grade Tank: Volume ____ _bbls: Construction Material _ 12. Check Appropriate Box to Indicate, Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDON ALTERING CASING **TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT PULL OR ALTER CASING** MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** OTHER: OTHER: CHEMICAL TREATMENT X 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. XTO Energy Inc. performed a chemical treatment on this well on 11/9/2006 in the following manner: MIRU pump truck. Pumped 100 gals 15% HCl acid mixed with 10 gals F-750 (foamer), 2 gals C-864 (corrosion inhibitor) & 1 gal of CB-1089 (iron controller). Flush w/1 bbl of 2% KCl water. RDMO pump truck. RWTP @ 2:00 pm, 11/10/2006. 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 for closed according to NMOCD guidelines _____, a general permit _____ or an (attached) alternative OCD-approved plan _____ TITLE REGULATORY COMPLIANCE TECH DATE 12/20/2006 E-mail address: holly perkins@xtoenergy.com Type or print name HOLLY C. PERKINS Telephone No. 505-324-1090 EFUTY OIL & GAS INSPECTOR, DIST. (2) For State Use Only APPROVED BY DATE

Conditions of Approval, if any: