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 30-045-31610 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave . Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III FEE \square STATE \square 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 FULLERION FEDERAL 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 BASIN DAKOTA/KUTZ GALLUP 382 CR 3100 AZTEC, NM 87410 4. Well Location 2195 ___ feet from the__ Unit Letter F: 1930 feet from the NORTH line and line Township Range 11W **NMPM** County SAN JUAN 27N 11. Elevation (Show whether DR, RKB, RT, GR. etc.) Pit or Below-grade Tank Application or Closure _____ Depth to Groundwater ___ > ___ Distance from nearest fresh water well ______ Distance from nearest surface water ____ Below-Grade Tank: Volume____bbls; Construction Material _ Pit Liner Thickness: ___ 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: ALTERING CASING | PLUG AND ABANDON 🗀 REMEDIAL WORK PERFORM REMEDIAL WORK COMMENCE DRILLING OPNS. PLUG AND **TEMPORARILY ABANDON** CHANGE PLANS **ABANDONMENT** CASING TEST AND **MULTIPLE** PULL OR ALTER CASING **CEMENT JOB** COMPLETION X OTHER: AMEND DHC ALLOC OTHER: 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. Effective 5/08 XTO would like to amend the DHC allocations based on an updated 9-section EUR as follows: DK: Gas 80% Oil 34% Water 55% Gas 20% Oil 66% Water 45% RCUD JUN 20'08 Please see the attached spreadsheet for support. OIL CONS. DIV. DIST. 3 I hereby certify that the impormation above is true and complete to the best of my knowledge and belief. I further certify that any pit or belowgrade tank has been/will be constructed of closed according to NMOCD guidelines _____, a general permit _____or an (attached) alternative OCD-approved plan _____ TITLE REGULATORY COMPLIANCE TECH DATE 6/19/08 SIGNATURE. LORRI D. BINGHAM E-mail address: Telephone No. 505-333-3100 Type or print name/LORRI D. BINGHAM Deputy Oil & Gas Inspector. For State Use Only JUN 2 4 2008 District #3 DATE _ TITLE. APPROVED BY_ Conditions of Approval, if any: