Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for parties abandoned well. Use Form	proposals to drill or to ro n 3160-3 (APD) for such	e-enter an JAN 2 proposals.	7 2009	6 If Indian, Allotte NAVAJO ALLOTE		
SUBMIT IN TRIPLICAT	TE - Other instructions on		Field Offic			
1 Type of Well Other 2 Name of Operator XTO ENERGY INC.				8 Well Name and No IRISH #2 9 API Well No		
3a. Address 3b. Phone No. (include area code)				30-045-33743		
382 CR 3100 AZTEC, NM 87410 4 Location of Well (Footage, Sec., T., R., M., or Survey Description) 1550' FSL & 1900' FWL NESW Sec. 22 (K) -T25N-R10W		505-333- 4. P.M.	3100	10. Field and Pool, or Exploratory Area BASIN DAKOTA		
			11. County or Parish, State SAN JUAN NM			
12. CHECK APPROPRIATE	E BOX(ES) TO INDICAT	E NATURE OF NOT	ICE, REPO			
TYPE OF SUBMISSION		ТҮРЕ С	OF ACTION			
Notice of Intent Subsequent Report	Acidize Alter Casing Casing Repair	Deepen	Reclamatio	e X	Water Shut-Off Well Integrity Other 1ST DELIVERY	
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Abandon Plug Back	Temporaril Water Disp		PWOP	
If the proposal is to deepen directionally or recomp Attach the Bond under which the work will be perfollowing completion of the involved operations. It testing has been completed. Final Abandonment I determined that the final site is ready for final inspection. Strong Energy Inc. 1st Delivered the 500 MCFPD.	rformed or provide the Bond N If the operation results in a mult Notices shall be filed only after ction)	o on file with BLM/BIA iple completion or recon all requirements, includi	i. Required sinpletion in a ning reclamation	ubsequent reports sl new interval, a Form in, have been compl	hall be filed within 30 days a 160-4 shall be filed once eted, and the operator has	
WFS mtr #94000					NN 29 '09 NS ₃ DIV.	
XTO PWOP & stsrted PU @ 9:30 a.m.	, 01/23/2009. Ppg (5 x 102" SPM.			•	
14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) DOLENA JOHNSON Signature			SA COWEITY	ANCE TECHNICI	AN	
Lalla Cama	S SPACE FOR FEDERAL	OR STATE OFFICE	FUSE	ACO	CEPTED FOR RECORD	
Approved by	O C. AGE ! ON I EDERAL	Title		Date		
Conditions of approval, if any, are attached. Approval of this not the applicant holds legal or equitable title to those rights in the subsentitle the applicant to conduct operations thereon		Office		FAR	JAN 27 2009 MINGTONALED OFFICE	