Cervel by UCD: 12/11/2024 1:12:38 PM U.S. Department of the Interior BUREAU OF LAND MANAGEMENT		Sundry Print Repoi
Well Name: POKER LAKE UNIT 13-1 PC	Well Location: T24S / R29E / SEC 13 / SWNE / 32.218446 / -103.935095	County or Parish/State: EDDY / NM
Well Number: 105H	Type of Well: CONVENTIONAL GAS WELL	Allottee or Tribe Name:
Lease Number: NMNM05912	Unit or CA Name: POKER LAKE UNIT	Unit or CA Number: NMNM71016X
US Well Number: 3001554010	Operator: XTO PERMIAN OPERATING LLC	

Notice of Intent

Sundry ID: 2823869

Type of Submission: Notice of Intent

Date Sundry Submitted: 11/21/2024

Date proposed operation will begin: 11/26/2024

Type of Action: APD Change Time Sundry Submitted: 12:45 8

Procedure Description: XTO respectfully requests to make the following changes: Dedicated acreage to: 640.00 ac Updated spacing unit on the new form No new surface disturbance

NOI Attachments

Procedure Description

2023060327_XTO_POKER_LAKE_UNIT_13_1_PC_105H_C_102_FINAL_Signed_7_28_23___AMENDED_N EW_FORM_9_8_2024_11_09_2024__08_40_20241121124435.pdf

9 <i>OCD : 12/11/2024 1: 12:38 PM</i> Jame: POKER LAKE UNIT 13-1	Well Location: T24S / R29E / SEC 13 / SWNE / 32.218446 / -103.935095	County or Parish/State: EDD ^{Page} /2 of NM
lumber: 105H	Type of Well: CONVENTIONAL GAS WELL	Allottee or Tribe Name:
Number: NMNM05912	Unit or CA Name: POKER LAKE UNIT	Unit or CA Number: NMNM71016X
ell Number: 3001554010	Operator: XTO PERMIAN OPERATING LLC	
	lumber: 105H Number: NMNM05912	SWNE / 32.218446 / -103.935095Iumber: 105HType of Well: CONVENTIONAL GAS WELLNumber: NMNM05912Unit or CA Name: POKER LAKE UNITell Number: 3001554010Operator: XTO PERMIAN OPERATING

Operator

I certify that the foregoing is true and correct. 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. Electronic submission of Sundry Notices through this system satisfies regulations requiring a

Operator Electronic Signature: MANOJ VENKATESH

Signed on: NOV 26, 2024 09:49 AM

Name: XTO PERMIAN OPERATING LLC

Title: Regulatory Analyst

Street Address: 22777 SPRINGWOODS VILLAGE PARKWAY

City: SPRING

State: TX

Phone: (720) 539-1673

Email address: MANOJ.VENKATESH@EXXONMOBIL.COM

State:

Field

Representative Name: Street Address: City: Phone: Email address:

BLM Point of Contact

BLM POC Name: CHRISTOPHER WALLS BLM POC Phone: 5752342234 Disposition: Accepted Signature: Chris Walls BLM POC Title: Petroleum Engineer BLM POC Email Address: cwalls@blm.gov Disposition Date: 12/04/2024

Zip:

Received by OCD: 12/11/2024 1:12:38 PM

•					
	UNITED STATI PARTMENT OF THE I EAU OF LAND MAN	FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2021 5. Lease Serial No.			
Do not use this		ORTS ON WELLS to drill or to re-enter an .PD) for such proposals.	6. If Indian, Allottee or Tribe N	ame	
SUBMIT IN	TRIPLICATE - Other instr	uctions on page 2	7. If Unit of CA/Agreement, Na	ame and/or No.	
1. Type of Well Oil Well Gas V	Vell Other		8. Well Name and No.		
2. Name of Operator			9. API Well No.		
3a. Address		10. Field and Pool or Exploratory Area			
4. Location of Well (Footage, Sec., T., I	R.,M., or Survey Description))	11. Country or Parish, State		
12. CHE	CK THE APPROPRIATE B	OX(ES) TO INDICATE NATURE (OF NOTICE, REPORT OR OTH	ER DATA	
TYPE OF SUBMISSION		TYPI	E OF ACTION		
Notice of Intent	Acidize	Deepen Hydraulic Fracturing	Production (Start/Resume) Reclamation	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair Change Plans	New Construction	Recomplete Temporarily Abandon	Other	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
the Bond under which the work wi completion of the involved operation	ally or recomplete horizontal Il be perfonned or provide th ons. If the operation results in	ly, give subsurface locations and me e Bond No. on file with BLM/BIA. n a multiple completion or recomple	easured and true vertical depths of Required subsequent reports mus perion in a new interval, a Form 31	f all pertinent markers and zones. Attach	

14. I hereby certify that the foregoing is true and correct. Name (<i>Printed/Typed</i>)			
	Title		
Signature	Date		
	Date		
THE SPACE FOR FEDE	RAL OR STATE OF	FICE USE	
Approved by			
	Title	Date	
Conditions of approval, if any, are attached. Approval of this notice does not warrant certify that the applicant holds legal or equitable title to those rights in the subject lea which would entitle the applicant to conduct operations thereon.			
Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any any false, fictitious or fraudulent statements or representations as to any matter within		llfully to make to any department or agency of the Un	ited States

(Instructions on page 2)

This form is designed for submitting proposals to perform certain well operations and reports of such operations when completed as indicated on Federal and Indian lands pursuant to applicable Federal law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local area or regional procedures and practices, are either shown below, will be issued by or may be obtained from the local Federal office.

SPECIFIC INSTRUCTIONS

Item 4 - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

Item 13: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by the local Federal office. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to the top of any tubing left in the hole; method of closing top of well and date well site conditioned for final inspection looking for approval of the abandonment. If the proposal will involve **hydraulic fracturing operations**, you must comply with 43 CFR 3162.3-3, including providing information about the protection of usable water. Operators should provide the best available information about all formations containing water and their depths. This information could include data and interpretation of resistivity logs run on nearby wells. Information may also be obtained from state or tribal regulatory agencies and from local BLM offices.

NOTICES

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c)and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

EFFECT OF NOT PROVIDING THE INFORMATION: Filing of this notice and report and disclosure of the information is mandatory for those subsequent well operations specified in 43 CFR 3162.3-2, 3162.3-3, 3162.3-4.

The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

Response to this request is mandatory.

The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

BURDEN HOURS STATEMENT: Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C St., N.W., Mail Stop 401 LS, Washington, D.C. 20240

Additional Information

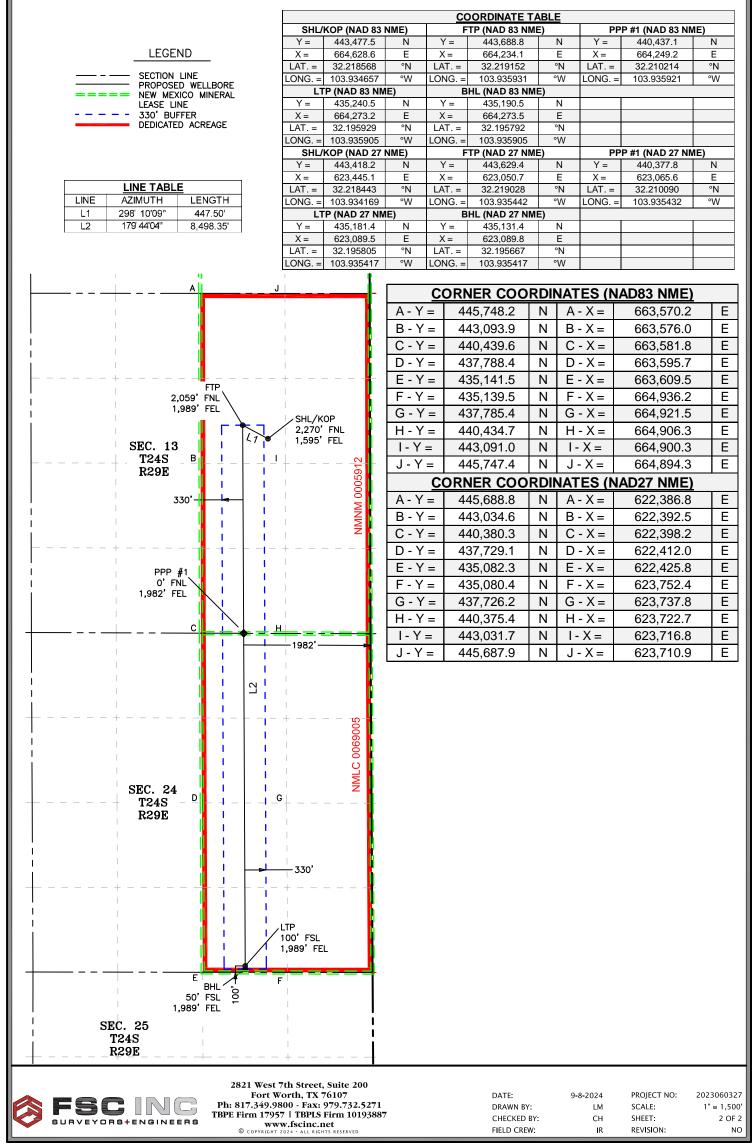
Location of Well

0. SHL: SWNE / 2270 FNL / 1595 FEL / TWSP: 24S / RANGE: 29E / SECTION: 13 / LAT: 32.218446 / LONG: -103.935095 (TVD: 0 feet, MD: 0 feet) PPP: SWNE / 2540 FNL / 2310 FEL / TWSP: 24S / RANGE: 29E / SECTION: 13 / LAT: 32.217834 / LONG: -103.936971 (TVD: 10433 feet, MD: 10821 feet) BHL: TR O / 50 FNL / 1989 FEL / TWSP: 24S / RANGE: 29E / SECTION: 24 / LAT: 32.195667 / LONG: -103.935417 (TVD: 10433 feet, MD: 21109 feet) Received by OCD: 12/11/2024 1:12:38 PM

												Revis	sed July 9, 2024	
$\left \right \frac{C-10}{C}$	<u>)2</u>			Ene	rov λ			ew Mexico ral Resources D) enartr	nent			, , , , , , , , , , , , , , , , , , ,	
							TION DIVISIO	-	nom	Submittel	Submittal			
										Type:	Amend	ed Report		
												As Dril	led	
					١	WELL LOC	CATION	INFORMATION						
API Nu 30-0	umber 015-54010			1 Code 8220			Pool Nam PURPL	e E SAGE; WOLFCAN	/IP					
	ty Code		Prop	perty Name	POKE	ER LAKE UN	IIT 13-1 P	с				Vell Number 105H		
ORGIE 3730	D No.		Oper	rator Name	XTO F	PERMIAN OF	PERATIN	IG. LLC. Ground Level Elevation					Elevation	
	e Owner:	State 🗌 I	Fee 🗌] Tribal 🔀]	Federal			Mineral Owner:	State	Fee 🗌 Trib		3,104' ıl		
							Surface	Location						
UL G	Section 13	Townshi 24 S	1	Range 29 E	Lot	Ft. from N/S	s D' FNL	Ft. from E/W 1,595' FEL	Latitude 32.218		ongitude -103.9346		County EDDY	
						, -		le Location						
UL O	Section 24	Townshi 24 S	*	Range 29 E	Lot	Ft. from N/S 50' FS	I	Ft. from E/W 1,989' FEL	Latitude 32.195		ongitude -103.93590	05 Cour	nty DDY	
Dedica	ated Acres	Infill or D		ya Well	Definin	g Well API		Overlapping Spacing L	nit (V/N)	Consolid	ation Code			
640		INFILL		ig wen		1554014		Overlapping Spacing Un Y	int (17N)	U				
Order M	Numbers.							Well setbacks are under	r Common	Ownership:	🛛 Yes 🗌	No		
								Point (KOP)	1			1		
UL G	Section 13	Townshi 24 S	·	Range 29 E	Lot	Ft. from N/S 2,270	s D' FNL	Ft. from E/W 1,595' FEL	Latitude 32.218		ongitude -103.93465	57 Cour		
								Point (FTP)	1					
UL G	Section 13	Townshi 24 S	·	Range 29 E	Lot	Ft. from N/S 2,059'		Ft. from E/W 1,989' FEL	Latitude 32.219		.ongitude -103.93593	31 Cour		
UL	Section	Townshi	in	Range	Lot	La Ft. from N/S		Point (LTP) Ft. from E/W	Latitude	I	ongitude	Cour	nty	
O	24	24 S	·	29 E		100' F		1,989' FEL	32.195		-103.9359(-	
Unitize	ad Area or Ar		rm Inte	aract	Spacin	g Unit Type 5		tal 🗆 Vartical	G	round Floor	Elevation:			
Unitized Area or Area of Uniform Interest NMNM105422429 Spacing Unit Type X Horizon										Elevation: 3	,104'			
OPE	RATOR C	ERTIFIC	CATI	IONS				SURVEYOR CH	ERTIFIC	CATIONS	5			
						e and complete		I hereby certify that notes of actual surve						
interest	t or unleased i	mineral inte	erest in	n the land inc	cluding th	either owns a w 1e proposed bot 1ant to a contro	ttom hole	is true and correct to	the best of the be	of my belief. TESSIONAL SUF	VEYOR NO.	ision, and in	ui ine sume	
an own	ner of such a n	nineral or w	vorking	g interest, or	to a volu			21209, DO HEREBY CERTIFY THAT THIS SURVEY PLAT AND THE ACTUAL SURVEY ON THE GROUND UPON WHICH IT IS BASED WERE PERFORMED BY ME OR UNDER MY DIRECT SUPERVISION; THAT I AM RESPONSIBLE FOR THIS SURVEY. THAT THIS SURVEY						
					0	anization has r rest or unlease		MEETS THE MINIMUM STAN MEXICO, AND THAT IS TRU MY KNOWLEDGE AND BELI	NDARDS FOR	SURVEYING II	N NEW	HEW ME	XICO	
interest	t in each tract	(in the targ	get pool	ol or formatic	on) in whi	ich any part of	the well's	(21209)						
completed interval will be located or obtained a compulsory pooling form the division.						TIM C. PAPPAS REGISTERED PROFESSIONAL LAND SURVEYOR								
Ma	inoj Ver	rkates	h	(09/11	/24		TIM C. PAPPAS REGISTERED PROFESSIONAL LAND SURVEYOR STATE OF NEW MEXICO NO. 21209					L SUR!	
Signature Date					Signature and Seal of Professional Surveyor									
Mano	oj Venka	ıtesh							1					
Printed Name						Certificate Number Date of Survey			•					
manoj.venkatesh@exxonmobil.com Email Address					TIM C. PAPPAS 21209 7/28/2023									
	Note: No al	lowable wi	ill be a.	ussigned to th	his compi	letion until all	interests h	ave been consolidated o	or a non-si	andard unit	has been app	proved by the	e division.	
	FSC		NC		Ph: 817	Street., Ste 20 7.349.9800 - Fa m 17957 TBI	ax: 979.73		DATE: DRAWI		9-8-2024 LM	PROJECT NC SCALE:): 2023060327	
	JURVEYOR	18+ENGI	NEEF	RS		www.fscii	nc.net		CHECK FIELD (CH IR	SHEET: REVISION:	1 OF 2 NC	

This grid represents a standard section. You may superimpose a non-standard section, or a larger area, over this grid. Operators must outline the dedicated acreage in a red box, clearly show the well surface location and bottom hole location, if it is directionally drilled, with the dimensions from the section lines in the cardinal directions. If this is a horizontal wellbore show on this plat the location of the First Take Point and Last Take Point, and the point within the Completed interval (other than the First Take Point or Last Take Point) that is the closest to any outer boundary of the tract.

Surveyors shall use the latest United States government survey or dependent resurvey. Well locations will be in reference to the New Mexico Principal Meridian. If the land is not surveyed, contact the OCD Engineering Bureau. Independent subdivision surveys will not be acceptable.



Sante Fe Main Office Phone: (505) 476-3441

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

CONDITIONS

Operator:	OGRID:
XTO PERMIAN OPERATING LLC.	373075
6401 HOLIDAY HILL ROAD	Action Number:
MIDLAND, TX 79707	410757
	Action Type:
	[C-103] NOI Change of Plans (C-103A)
CONDITIONS	

Created By	Condition	Condition Date
dmcclure	None	12/20/2024

Page 8 of 8

.

Action 410757