

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**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 reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM01119
2. Name of Operator XTO ENERGY INCORPORATED		6. If Indian, Allottee or Tribe Name
3a. Address 200 LORRAINE SUITE 800 MIDLAND, TX 79701		7. If Unit or CA/Agreement, Name and/or No. NMNM94450X
3b. Phone No. (include area code) Ph: 432-620-4318 Fx: 432-618-3530		8. Well Name and No. AVALON UNIT 501
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 31 T20S R28E NENE 660FNL 660FEL		9. API Well No. 30-015-24331-00-S1 <input checked="" type="checkbox"/>
		10. Field and Pool, or Exploratory AVALON
		11. County or Parish, and State EDDY COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Venting and/or Flaring
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 site is ready for final inspection.)

AVALON DELAWARE CENTRAL TANK BATTERY

ASSOCIATED WELLS:

- AVALON DELAWARE UNIT #501 30-015-24331
- AVALON DELAWARE UNIT #503 30-015-28594
- AVALON DELAWARE UNIT #505 30-015-28677
- AVALON DELAWARE UNIT #507 30-015-28678
- AVALON DELAWARE UNIT #509 30-015-54332
- AVALON DELAWARE UNIT #511 30-015-24524
- AVALON DELAWARE UNIT #514 30-015-24194
- AVALON DELAWARE UNIT #515 30-015-26370
- AVALON DELAWARE UNIT #517 30-015-24337

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

APR 06 2015

RECEIVED

Accepted for record  
NMOC

*ARD* 4/28/15

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #248780 verified by the BLM Well Information System**  
**For XTO ENERGY INCORPORATED, sent to the Carlsbad**  
**Committed to AFMSS for processing by CATHY QUEEN on 06/10/2014 (14MMS0061SE)**

Name (Printed/Typed) PATTY R URIAS	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 06/09/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD  
APR 1 2015  
BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

Approved By _____	Title _____	Date _____
Office BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE		

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.