Form 3160-5 (April 2004)

UNITED STATES ... DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires March 31, 2007

5. Lease Serial No.

SE0788441	8F07884

Do not use this form for abandoned well. Use Form	6. If Indian, Allottee or Tribe Name					
SUBMIT IN TRIPLICATE -	Other instructions	on reverse side	2004	7. If Unit or CA/Agreement, Name and/or No		
1. Type of Well Oil Well X Gas Well Other 2. Name of Operator				8. Well Name and No.		
XTO Energy Inc. 3a. Address 2700 Farmington Ave., Bldg. K. Ste 4. Location of Well (Footage, Sec., T., R., M., or Survey I 1015' FSL & 1020' FEL, SEC 03P, T30	Description)	3b. Phone No. (include 505	àrea code) -324-1090	9. API Well No. 30-045-32291 10. Field and Pool, or Exploratory Area BLANCO MESAVEROE 11. County or Parish, State		
12. CHECK APPROPRIATE	BOX(ES) TO IND	DICATE NATURE OF	F NOTICE, REF	SAN JUAN NM PORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injecti	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Reclamat	ete Other		
following completion of the involved operations. It testing has been completed. Final Abandonment I determined that the final site is ready for final inspection. The second casing design will be as follows: Surface Casing: 9-5/8", 36.0#, J-cement with accelerator and LOM needs to the second complete the second casing complete the second case case case complete the second case case case case case case case case	Notices shall be filed or ction.) Leto change the -55, STC set @ 3	casing design as 60' in a 12-1/4"	originally public. Cemen	on, have been completed, and the operator has proposed in the APD. The new set with +-175 sx Type III		
Production Casing: 5-1/2", 15.5#, Cement first stage with +-150 sx typically mixed @ 12.5 ppg, 2.01	Premium Lite HS					
Cement second stage with (lead) - cuft/sx followed by (tail) 50 sx cement to surf.				y mixed at 11.4 ppg & 3.03		
14. I hereby certify that the foregoing is true and correct Name (Pfinted Typed) HOLLY C. PERKINS		Title REGU Date 10/6/0	LATORY COMPL	IANCE TECH		
THE	S SPACE FOR FEI	DERAL OR STATE C				
Approved by	1 0	Title 1)	1 ~	Date		
Conditions of approval, if any, are attached. Approval coertify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations it.	those rights in the sub	varrant or Office	it. Ing	1 10/8/04		