• Form 31:50-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR CEIVEL

FORM APPROVED OMB No 1004-0137 Expires July 31, 2010

BURE	AU OF LAND	MANAGEM	ENT		
SUNDRY NO	OTICES AND	REPORTS (ON WELLS	06	2012

5. Lease Serial No NMSF-078977 6. If Indian, Allottee or Tribe Name

Do not use this f abandoned well.	orm for proposals to drill Use Form 3160-3 (APD) fo	u Sucii proposais	1 Ott.			
SUBMI 1 Type of Well	T IN TRIPLICATE – Other instruct	7 If Unit of CA	7 If Unit of CA/Agreement, Name and/or No NMNM-73795			
Oil Well Gas Well Other				8 Well Name and No BUTTE 1R		
2 Name of Operator XTO ENERGY INC			9 API Well No 30-045-26794			
		one No <i>(include area code</i> 3-3100	(include area code) 10 Field and Pool or Exploratory Area BASIN DAKOTA			
4 Location of Well (Footage, Sec , T , SENW, SEC 19 (F), T30N, R13W, N M P M 1790' FNL & 970' FWL	R , M , or Survey Description)		11 Country or I SAN JUAN, N	•		
12 CHEC	CK THE APPROPRIATE BOX(ES) T	O INDICATE NATURE	OF NOTICE, REPORT OR	OTHER DATA		
TYPE OF SUBMISSION		TYP	E OF ACTION	ION		
Notice of Intent Subsequent Report	Acidize Alter Casing Casing Repair Change Plans	Deepen Fracture Treat New Construction Plug and Abandon	Production (Start/Resu Reclamation Recomplete Temporarily Abandon	Water Shut-Off Well Integrity WETER CALIBRATION		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal	VARIANCE		
following completion of the involve testing has been completed. Final determined that the site is ready for XTO Energy Inc. would like to request. XTO Energy Inc. proposes to ACCEPTED FOR RECO	ed operations If the operation result Abandonment Notices must be filed or final inspection.) est an exception to the Onshore Operation of the meter for this well of the operation of the meter for this well of the operation result of the operation of the oper	s in a multiple completion only after all requirements, rder #5 that requires qu	or recompletion in a new in including reclamation, have	ent reports must be filed within 30 days interval, a Form 3160-4 must be filed once been completed and the operator has Due to low volume (less than 100		
14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) MALIA VILLERS Tit			INO TECH			
Signature Cala	Villes	Title PERMITT	· Ja			
THIS SPACE FOR FEDERAL OR STATE OFF				ENTERED AFMSS		
Approved by		Title		AUG 0 8 2012		
Conditions of approval, if any, are attached that the applicant holds legal or equitable to conduct operations.	tle to those rights in the subject lease w	ant or certify		BY ISTK.J. Schneider		
						

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

Well and Notice Remarks

Doc. Number 12KJS0926S

Doc. Type VARI

Case Number NMNM73795

Type 318310

Name BUTTE

API

300452679400S1 FACILITY

Well Name BUTTE

Number

1R

1R

Operator

XTO ENERGY INC **XTO ENERGY INC**

Subject

Doc Number

Date

BUTTE

Author

Category

12KJS0926S

08/08/2012

KEVIN SCHNEIDER

VARI

APPROVAL

Category

GENERAL

Date 08/08/2012

Variance to Onshore Order #5, for semi-annual gas meter calibrations in accordance with NTL 92-5. Wells produce Less than 100 MCFD. Approval is indefinite and will remain in effect until production no longer meets the requirement of NTL 92-5 or is rescinded by the BLM by writtnen notice.