Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources May 27, 2004 District I 1625 N. French Dr., Hobbs, NM 87240 30-045-32662 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE X 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 FEE District IV 6. State Oil & Gas Lease No. 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A STATE GAS COM M DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well Gas Well X Other 2. Name of Operator 9. OGRID Number 167067 XTO Energy Inc. 10. Pool name or Wildcat 3. Address of Operator 2700 Farmington Ave., Bldg, K. Ste 1 Farmington, NM 87401 AZTEC PC / BASIN FRUITLAND COAL 4. Well Location 1088 feet from the SOUTH line and 1,040' feet from the Unit Letter line Township 31N Range **NMPM** 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6,170' GL Pit or Below-grade Tank Application or Closure Pit type _____ Depth to Groundwater _ Distance from nearest fresh water well _____ Distance from nearest surface water _ Pit Liner Thickness: _ Below-Grade Tank: Volume____ _bbls; Construction Material _ 12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: **REMEDIAL WORK** PERFORM REMEDIAL WORK ALTERING CASING PLUG AND ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. **PLUG AND TEMPORARILY ABANDON ABANDONMENT PULL OR ALTER CASING** MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** X OTHER: OTHER: PRESSURE TEST CASING 13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. XTO Energy Inc. pressure tested 5-1/2" production casing on 8/30/05 to 2000 psig for 30 minutes w/chart. Increased pressure to 3850 psig for 5 minutes. Tested OK. I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further Lify that any pit or below grade tank has been/will/be constructed or glosed according to NMOCD guidelines _____, a general permit ____or an (attached) alternated TITLE REGULATORY COMPLIANCE TECH SIGNATURE. E-mail address: REGULATORY@XTOENERGY.COM Type or print name HOLLY C. PERKINS Telephone No. 505-324-1090 For State Use Only SEP 3 0 2005 SUPERVISOR DISTRICT # 3 APPROVED BY DATE

Conditions of Approval, if any: