

State of New Mexico
Energy, Minerals and Natural Resources Department

Susana Martinez
Governor

David Martin
Cabinet Secretary

Brett F. Woods, Ph.D.
Deputy Cabinet Secretary

Jami Bailey, Division Director
Oil Conservation Division



New Mexico Oil Conservation Division approval and conditions listed below are made in accordance with OCD Rule 19.15.7.11 and are in addition to the actions approved by BLM on the following 3160-4 or 3160-5 form.

Operator Signature Date: 10-20-14
Well information:

API WELL #	Well Name	Well #	Operator Name	Type	Stat	County				N/S	Rng	W/E	Feet	NS	Ft	EW	
30-045-22046-00-00	MOUNTVIEW	002	XTO ENERGY, INC	G	A	San Juan	F	D	19	25	N	10	W	990	N	790	W

Application Type:

- P&A
 Drilling/Casing Change
 Location Change
 Recomplete/DHC (For hydraulic fracturing operations review EPA Underground injection control Guidance #84)
 Other:

Conditions of Approval:

Notify NMOCD 24hrs prior to beginning operations, casing & cement

See APD Conditions of approval regarding Hydraulic Fracturing, Oil base muds and Well-bore communication.

Submit C104 and completion report for Basin Mancos before returning to production.

NMOCD Approved by Signature

11-10-14
Date

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
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 page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
XTO ENERGY INC.

3a. Address
382 CR 3100 AZTEC, NM 87410

3b. Phone No. (include area code)
505-333-3206

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
990' FNL & 790' FWL NWNW SEC.19 (D) -T25N-R10W N.M.P.M.

5. Lease Serial No.
NMNM23063

6. If Indian, Allotment, or Indian Reservation
OIL CONS. DIV DIST. 3

7. If Unit or CA/Agreement, Name and/or No.
NOV 03 2011

8. Well Name and No.
MOUNTVIEW #2

9. API Well No.
30-045-22046

10. Field and Pool, or Exploratory Area
Basin DAKOTA/BASIN MANCOS

11. County or Parish, State
SAN JUAN NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" 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 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 RC BASIN MC
	<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 final site is ready for final inspection.)

XTO Energy Inc. requests to rescind the previous NOI to RC Dated 10/15/14 due to procedure changes.

XTO Energy Inc. proposes to Recomplete this well to the Basin Mancos Formation per the following:

MIRU PU. TIH w/5-1/2" CBP & set @ 6,040'. MIRU WLU, RIH w/GR/CCL/CBL and log from CBP @ 6,040' to surf. Perforate Mancos from 5,049'-5,256' w/expendable csg gun (0.34" dia, 30 holes). RIH w/5-1/2" packer set @ +/-4,940'. RDMO PU. Acidize Mancos perfs fr/ 5,049'-5256' w/1,500 gals 15% NEFE HCl acid. Frac Mancos perfs from 5,049'-5,256' w/157,100 gals foam carrying 200,000 lbs sand. Release pkr & TOH. CO frac sand to CBP @ 6,040'. DO CBP & CO to 6,170' (PBTD). TIH w/2-3/8", 4.7#, J-55 tbg. EOT @ +/- 6,120'. TIH w/rods & pmp. RDMO.

An Application to DHC will be submitted separately. XTO Energy Inc, will obtain the DHC order before commingling.

SEE ATTACHED FOR
CONDITIONS OF APPROVAL DHC 3916A2

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

Name (Printed/Typed) **KRISTEN D. BABCOCK** Title **REGULATORY ANALYST**

Signature *Kristen D. Babcock* Date **10/20/2014**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by *[Signature]* Title **Petr. Eng** Date **10/29/14**

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Office

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, makes 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.

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised October 19, 2009
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-045-22046		² Pool Code 97232		³ Pool Name BASIN MANCOS	
⁴ Property Code 22796		⁵ Property Name MOUNTVIEW		⁶ Well Number #02	
⁷ OGRID No. 5380		⁸ Operator Name XTO ENERGY INC.		⁹ Elevation 6583'	

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	19	25N	10W		990'	NORTH	790'	WEST	SAN JUAN

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
SAME									

¹² Dedicated Acres MC: 320 ACRES	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

319.28

	¹⁷ OPERATOR CERTIFICATION	
	<i>I hereby certify that the information contained herein is true & complete to the best of my knowledge & belief and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i>	
	<i>Kristen D. Babcock</i> Signature	
	KRISTEN D. BABCOCK Printed Name Title REGULATORY ANALYST Date 10/2/2014	
14	¹⁸ SURVEYOR CERTIFICATION	
	<i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true & correct to the best of my belief.</i>	
	6/23/1984 Date of Survey Original Survey Signed By: John A. Vukonich 14831 Certificate Number	

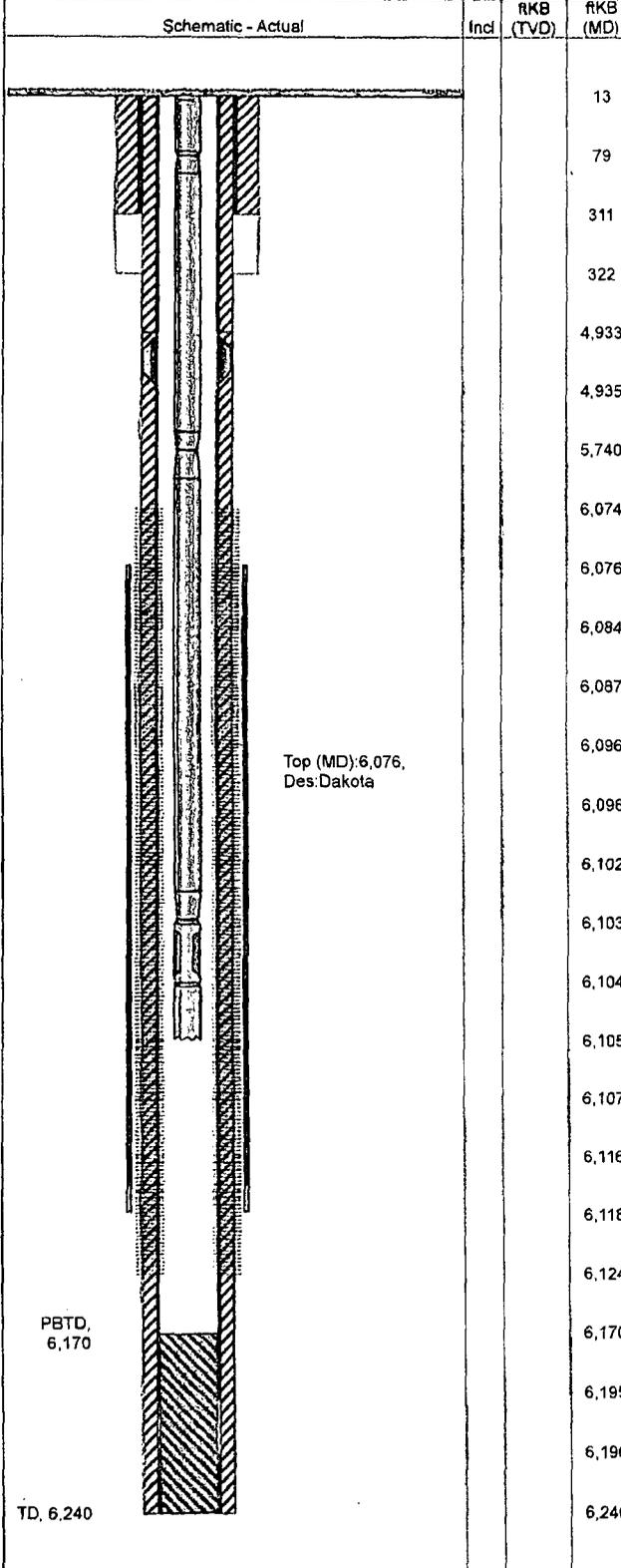


XTO - Wellbore Diagram

Well Name: Mountview 02

API/UVI 30045220460000	EW Dist (ft) 790.0	E/W Ref FWL	N/S Dist (ft) 990.0	N/S Ref FNL	Location T25N-R10W-S19	Field Name Basin Dakota	County San Juan	State/Province New Mexico
Well Configuration Type Vertical	XTO ID B 70771	Ong KB Elev (ft) 6,596.00	Gr Elev (ft) 6,583.00	KB-Grd (ft) 13.00	Spud Date 11/2/1976	PBD (All) (ftKB) Original Hole - 6170.0	Total Depth (ftKB) 6,240.0	Method Of Production Plunger Lift

Well Config: Vertical - Original Hole, 8/26/2014 2:34:41 PM



Zones		Top (ftKB)		Btm (ftKB)						
Dakota		6,076.0		6,118.0						
Casing Strings										
13	Casing Description Surface	OD (in) 8 5/8	Wt (lbs/ft) 32.00	String Grade K-55	Top Connection Set Depth (ftKB) 311.0					
79	Casing Description Production	OD (in) 5 1/2	Wt (lbs/ft) 14.00	String Grade K-55	Top Connection Set Depth (ftKB) 6,240.0					
311	Item Description DV Tool	OD (in) 5 1/2	Wt (lbs/ft)	Grade	Top (ftKB) Bottom (ftKB) 4,933.0 4,935.0					
Cement										
322	Description Surface Casing Cement	Type casing	String Surface, 311.0ftKB							
Comment Cmt'd w/275 sx Class A cmt. Circ cmt to surf.										
4,933	Description Production Casing Cement	Type casing	String Production, 6,240.0ftKB							
Comment Cmt'd first stage lead w/50 sx 65/35 POZ w/adds Tailed w/150 sx Class B w/adds. Open DV tool & cmt'd second stage w/625 sx 65/35 w/adds. Tailed w/50 sx neat. Circ cmt to surf.										
5,740										
Perforations										
	Date	Top (ftKB)	Btm (ftKB)	Shot Dens (shots/ft)	Hole Diameter (in)	Phasing (°)	Curr... Status	Zone		
6,074	9/26/1995	6,074.0	6,124.0	2.0				Dakota		
	12/16/1976	6,076.0	6,084.0	2.0				Dakota		
6,084	12/16/1976	6,087.0	6,096.0	2.0				Dakota		
	12/16/1976	6,098.0	6,102.0	2.0				Dakota		
6,087	12/16/1976	6,105.0	6,107.0	2.0				Dakota		
	12/16/1973	6,116.0	6,118.0	2.0				Dakota		
Tubing Strings										
6,096	Tubing Description Tubing - Production	Run Date 6/30/2006	Set Depth (ftKB) 6,105.0							
Tubing Components										
6,102	Item Description Tubing	Jts 2	Model T&C Upset	OD (in) 2 3/8	Wt (lbs/ft) 4.70	Gra... J-55	Top Thread	Len (ft) 66.00	Top (ftKB) 13.0	Btm (ftKB) 79.0
6,103	Tubing	182	T&C Upset	2 3/8	4.70	J-55		5,661.28	79.0	5,740.3
6,104	Tubing	11	T&C Upset	2 3/8	4.70	J-55		363.00	5,740.3	6,103.3
6,105	Seat Nipple	1		2 3/8				1.10	6,103.3	6,104.4
	Notched Collar	1		2 3/8				0.60	6,104.4	6,105.0
Stimulations & Treatments										
6,107	Frac Start Date 12/16/1976	Top Part (ftKB) 6076	Bottom Pe... 6118	V (slurry) (...)	Total Prop...	AIR (b...)	ATP (psi)	MTP (psi)	ISIP (psi)	
Comment Frac'd well w/56,448 gals fluid & 70,200# 20/40 sd.										
6,118										
6,124										
6,170										
6,195										
6,196										
6,240										

OIL CONS. DIV. DIST. 3
NOV 03 2014

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws 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, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on Items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in Item 22, and in Item 24 show the producing interval, or intervals, top(s), bottom(s), and name(s); (if any) for only the interval reported in Item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for Items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS TURKEY, CORED INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs	1532	1730	Sandstone, Shale			
Chacra	1942	2130	"			
Cliff House	2350	2720	"			
Menefee	2720	4010	"			
Point Lookout	4010	4230	"			
Gallup	5040	5350	"			
Dakota	6075	TD	"			

OFFICE OF RECOMBINATION
 GEOLOGICAL SURVEY
 UNITED STATES DEPARTMENT OF THE INTERIOR

BLM CONDITIONS OF APPROVAL

CASING REPAIR, WORKOVER AND RECOMPLETION OPERATIONS:

Note:

An application for Downhole Commingling (DHC) must be filed and approved by BLM before commencing DHC operations.

1. If casing repair operations are needed, obtain prior approval from this office before commencing repairs. If a CBL or other logs are run, provide this office with a copy.
2. After any casing repair operations, test cement squeeze to a minimum of 500# for 30 minutes with no more than 10 % pressure fall off in the 30 minute test period. Provide test chart with your subsequent report of operations
3. A properly functioning BOP and related equipment must be installed prior to commencing workover, casing repair, and/or recompletion operations.
4. Contact this office at (505) 564-7750 prior to conducting any cementing operations: Please contact Jim Lovato @ (505) 320-7378 if casing leaks are identified and a plan of repair is established.

SPECIAL STIPULATIONS:

1. Pits will be fenced during work-over operation.
2. All disturbance will be kept on existing pad.
3. All pits will be pulled and closed immediately upon completion of the recompletion and work-over activities.
4. Pits will be lined with an impervious material at least 12 mils thick.