Form 3160_a5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

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

5. Lease Serial No.

NMSF0	77	323	2
ranor o	,,,	JO.	,

. If Indian, Allottee or Tribe Name

abandoned well. Use Forn	n 3160-3 (APD) fo	r such proposals.			
SUBMIT IN TRIPLICATE - 0	Other instructions	on reverse side	:C5 MOV 10	7. If Unit of CA	/Agreement, Name and/or No
Type of Well Oil Well X Gas Well Other Name of Operator			7. EC	8. Well Name ar	
XTO Energy Inc.				9. API Well No.	
3a. Address		3b. Phone No. (include ar	ea code)	30-045-3271	1052
2700 Farmington Ave., Bldg. K. Ste 4. Location of Well (Footage, Sec., T., R., M., or Survey L		505-324-1090		ł	ool, or Exploratory Area
, , , , , , , , , , , , , , , , , , , ,	Description)			OTERO CHACE	TA/BLANCO MESAVERD
1,975' FSL & 1,980' FWL SEC. K27, T28N, R10W				11. County or I	
530. 127, 1201, 1201				SAN JUAN	NM
12. CHECK APPROPRIATE	BOX(ES) TO IND	DICATE NATURE OF	NOTICE, REP		
TYPE OF SUBMISSION		TYF	PE OF ACTION		
Notice of Intent	Acidize	Deepen	Production	(Start/Resume)	Water Shut-Off
X -	Alter Casing	Fracture Treat	Reclamatio	, [Well Integrity
X Subsequent Report		New Construction	Ħ	т Г	=======================================
	Casing Repair Change Plans	Plug and Abandon	Recomplet Temporaril	•	X Other RECOMPLETION
Final Abandonment Notice	l	= -		•	
	Convert to Injecti	on Plug Back	Water Disp	osal	
determined that the final site is ready for final inspection XTO Energy, Inc. recompleted this MIRU service rig. Unseated pump. BOP. NU stinger frac vlv. MIRU fr Perf'd MV fr/4249'-4522' (0.34 "d bbls wtr w/AFU. Ppd dwn tbg w/10 4560'; PBID @ 4600'. Oppen well &	well to the Me TOH w/rods, rod cac tnks. MIRU w dia, 30 holes). bbls 2% KCl wtr	l guide, pmp. ND WH LU. RIH w/GR. POH v Estb circ w/AFU. C & KW. DO CBP @ 43:	w/GR. RIH w/ O fr/2648' - 10'. TIH w/t	CBP; set CB 4600' (PBT bg, pin, SN	P @ 4600'. D). Used 105
				THE STATE OF THE S	10.53.4.53.56.57.50.00.00.00.00.00.00.00.00.00.00.00.00.
14. I hereby certify that the foregoing is true and correct Name (Printed Typed) HOLLEY C. PERKINS		Title REGULA	TORY COMPLI		all to tain 3,2
Willy C. Ferkus		Date 11/8/200			
	S SPACE FOR FEE	DERAL OR STATE OF	FICE USE	PTED COD A	
Approved by		Title		Dal	EOOHD -
Conditions of approval, if any, are attached. Approval o certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations the	those rights in the sub	varrant or Office oject lease	FARMA	ON 16 200	
Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section States any false, fictitious or fraudulent statements or representations.			and will y to ma	ke to any control	ent or agency of the United