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.

## NMNM02691

REVISED

SUNDRY NOTICES AND REPORTS ON WELLS

| Do not use this form for abandoned well. Use For  | 6. If Indian, Allottee or Tribe Name   |  |   |   |
|---|--|--|---|---|
| SUBMIT IN TRIPLICATE - Other instructions on reverse side   |  |  | 7. If Unit or CA/Agreement, Name and/or No. |   |
| 1. Type of Well   |  | RECEIVED                               |   |   |
| Oil Well X Gas Well Other   | 070  | FARMINGTO                              | H. M.                                       | 8. Well Name and No.                    |
| 2. Name of Operator   |  |  |   | FEDERAL GAS COM                         |
| XTO ENERGY INC.   |  |  |   | J #1E<br>9. API Well No.                |
| 3a. Address   | 3b.  | Phone No. (include ar                  | rea code)                                   | 30-045-26115                            |
| 2700 Farmington Ave., Bldg. K. Ste  |  | 505-3                                  | 24-1090                                     | 10. Field and Pool, or Exploratory Area |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey   | <b>ありな</b> じょ  | 10093037                               |   | GALLEGOS GALLUP                         |
| 1000'FNL, 1190'FWL SEC24, T27N, R12W  |  |  |   | 11. County or Parish, State             |
|   | 200  | The Madisin                            |   | 1                                       |
| 12. CHECK APPROPRIATE   | BOY/EQUITO INDICA  | TE: NATURE OF                          | NOTICE BED                                  | ORT, OR OTHER DATA                      |
|   | BON(ES)-TO INDIGA  | - A 701                                |   | ORT, OR OTHER DATA                      |
| TYPE OF SUBMISSION  | CE ONE OF  |  | PE OF ACTION                                |   |
| Notice of Intent  | Acidize C  | Deepen                                 | Production                                  | (Start/Resume) Water Shut-Off           |
|   |  | Practure Treat                         | Reclamation                                 |   |
| Subsequent Report   | Alter Casing   | _                                      |   |   |
|   | Casing Repair  | New Construction                       | X Recomple                                  | te Other                                |
| Final Abandonment Notice  | Change Plans   | Plug and Abandon                       | Temporari                                   | ly Abandon                              |
|   | Convert to Injection   | Plug Back                              | Water Dis                                   | posal                                   |
| 1) MIRU PU. 2) Blow well dwn & kill well w/2 3) TIH w/tbg, bit, SN. CO fill 4) MIRU WL trk. Log well. 5) Set CBP @ approx 5700'. Load 6) Perf GP (0.32" dia, 28 holes) 7) MIRU pmp trk. Acidize w/approx 8) MIRU frac equip. Frac GP peri KCl wtr carrying 74,000# 20/40 Bu 9) Set ppg ut. 10) ND WH. NU BOP. | to PBID (6304'). TO  csg w/wtr. PT CBP. ) fr/approx 5411' -  cx 1000 gals 15% NEF fs fr/5293' - 5591' rady sd & 30,000# 20 | 5591'.<br>Æ HCl wtr.<br>w/approx 62,00 | 0 gals 70Q (<br>CS. Record                  | 5, 10, 15 min SIP's.                    |
| A 41  |  |  |   | ITIONS OF APPROVAL                      |
| 12) TIH w/tbg, SN, pmp, spiral rod guide, RHBO tool, rods, OEMA.  Adhere to previously issued stipulations.   |  |  |   |   |
| 13) RDMO PU. Start well ppg & I   |  |  |   |   |
| 14. I hereby certify that the foregoing is true and correct Name (Printad Typed)  |  | Title                                  |   |   |
| /// HOWAY C. PERKINS  | HOLATY C. PERKINS REGULATORY COMPLIANCE TECH   |  |   |   |
| Ally C. Ferkins   |  | Date 1/19/20                           |   |   |
| THI   | S SPACE FOR FEDERA   | L OR STATE OF                          | FICE USE                                    |   |
| Approved by Hall Hall Hall Conditions of approval, if any, are attached. Approval certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations to   | o those rights in the subject le   | Title Por Office ase                   | ENE<br>M- FF                                | Date 1/23/06                            |

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. States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

## State of New Mexico Energy, Minerals & Natural Resources Department

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 OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505 Submit to Appropriate District Office

Revised August 15, 2000

Form C-102

Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

## **AMENDEDED** WELL LOCATION AND ACREAGE DEDICATION PLAT REPORT API Number Pool Code 26980 30-045-26115 AKUTA **GALLEGOS GALLUP Property Code** Well Number FEDERAL GAS COM J 1E OGRID No. Elevation Name 167067 XTO Energy. Inc. 6027 <sup>10</sup> Surface Location Township UL or lot no. Section Range Lot Idn Feet from the North/South line Feet from the East/West line County 1000 SAN JUAN D 27N 12W **NORTH** 1190 24 **WEST** <sup>11</sup>Bottom Hole Location If Different From Surface UL or lot no. Section Range Lot Idn Feet from the North/South line Township Feet from the East/West line County Dedicated Acres Joint or Infill 4 Consolidation Code GP: 400 ac NW/4 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

| 1190' | <u>1</u> 38 |    | OPERATOR CERTIFICATION I hereby certify that the information contained hereinis true and complete to the best of my knowledge and belief  Signature |
|-------|-------------|----|---|
|       | DAKOTA      |    | Holly C. Perkins  |
|       |             |    |   |
|       |             |    | Regulatory Compliance Tech  Title   |
|       |             |    | 1/19/2006   |
|       | 24          |    | Date  |
|       |             |    | SURVEYOR CERTIFICATION  |
|       |             |    | 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,<br>and that the same is true and correct to the<br>best of my belief.<br>8/17/1984                      |
|       |             | ]- | Date of Survey Original Survey Signed By:   |
|       |             |    | Fred B. Kerr  |
|       |             |    | 3950  |
|       |             |    | Certificate Number  |
|       |             |    |   |