

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000**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.5. Lease Serial No.
NMNM035634

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

☐ Oil Well ☒ Gas Well ☐ Other

8. Well Name and No.

H B MCGRADY A 1E

2. Name of Operator

XTO ENERGY INC

Contact: HOLLY PERKINS

E-Mail: Regulatory@xtoenergy.com

9. API Well No.

30-045-26095-00-S2

3a. Address

2700 FARMINGTON AVE., BLDG K, SUITE 1
FARMINGTON, NM 87401

3b. Phone No. (include area code)

Ph: 505.324.1090 Ext: 4020
Fx: 505.564.6700

10. Field and Pool, or Exploratory

BASIN FRUITLAND COAL

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 14 T27N R12W SESE 1000FSL 1000FEL
36.57060 N Lat, 108.07480 W Lon

11. County or Parish, and State

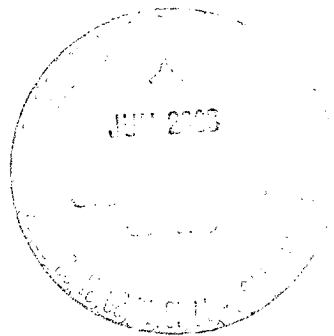
SAN JUAN COUNTY, NM

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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 recompleat 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 recompleat 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 site is ready for final inspection.)

XTO Energy Inc. plans to P&A this well per the attached procedure.



14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #22404 verified by the BLM Well Information System For XTO ENERGY INC, sent to the Farmington Committed to AFMSS for processing by Steve Mason on 05/28/2003 (03SXM0832SE)	
Name (Printed/Typed) DARRIN STEED	Title REGULATORY SUPERVISOR
Signature (Electronic Submission)	Date 05/27/2003

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By STEPHEN MASON	Title PETROLEUM ENGINEER	Date 05/29/2003
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 Farmington

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.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

NMOC

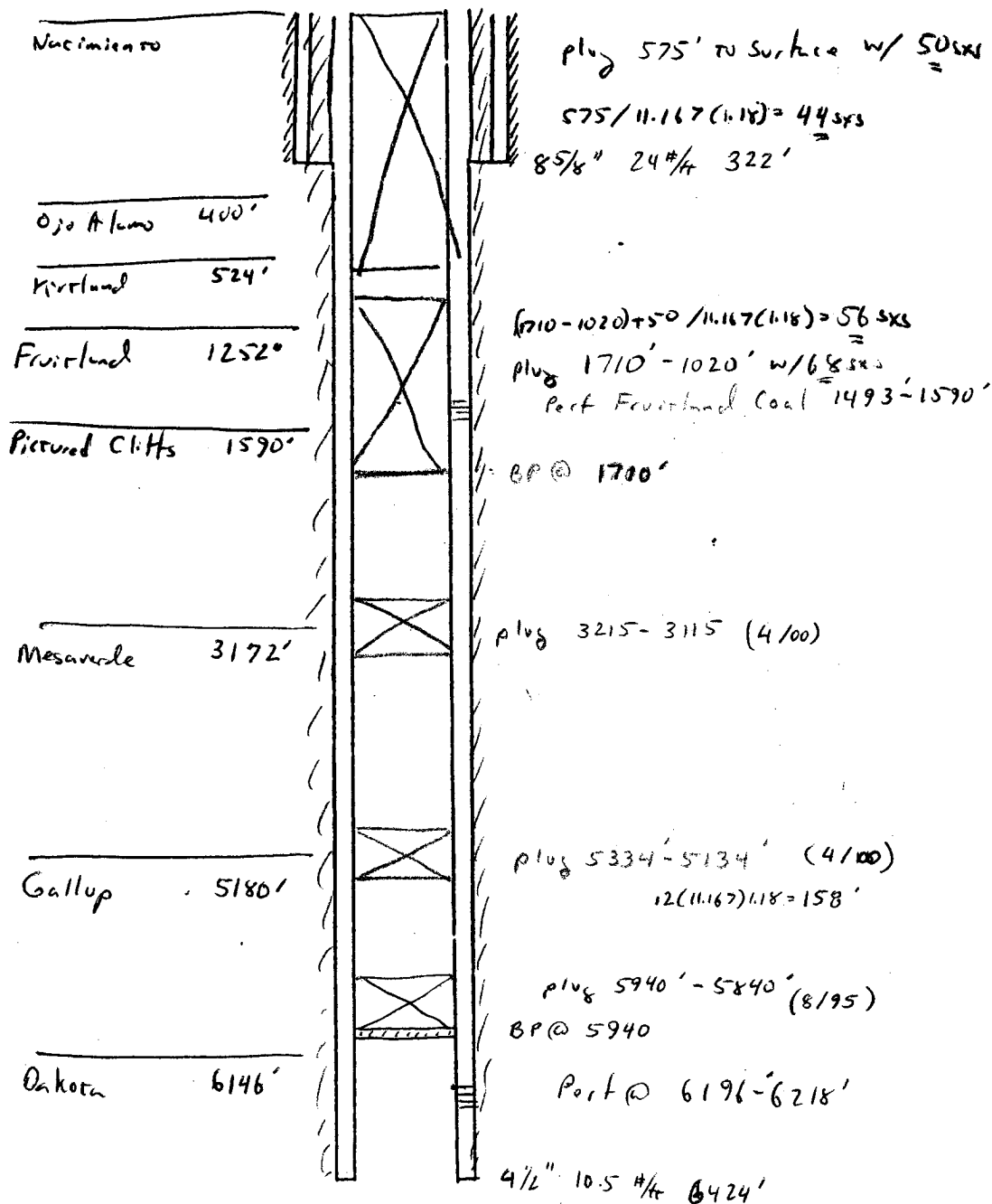
H. B. McGRADY A #1E
SEC 14, T 27 N, R 12 W
SAN JUAN COUNTY, NEW MEXICO

Formation: Basin Fruitland Coal
Surface casing: 8-5/8", 24#, J-55 csg @ 322'. Cmt'd w/230 sx cl "B" cmt w/2% CaCl₂.
Circ cmt to surf.
Production csg: 4-1/2", 10.5#, K-55 csg @ 6,425'. DV tool set @ 2,392'. Cmt'd 1st stg
w/1,324 ft³ 50/50 Pozmix. Tailed in w/118 ft³ cl "B" neat cmt. Cmt'd 2nd
stg w/1,251 ft³ 65/35 Pozmix. Circ cmt on both stg's to surf.
Tbg: 2-3/8" x 21' OPMA, SN, 49 jts 2-3/8", 4.7#, J-55, EUE, 8rd tbg. EOT @
1,622'. SN @ 1,601'.
Pump & Rods: 2" x 1-1/2" x 10' RWAC-Z pmp w/1" x 1' str nipple, spiral rod guide,
RHBO tool, 1" x 1' LS, 63 - 3/4" rods, 1 - 3/4" x 6' pony rod & 1-1/4" x
16' PR w/8' liner
Perfs: 1,493', 1,538', 1,540' & 1,574'-90' W/1 JSPF
Current Status: SI
Work over reason: P&A well.

MIRU PU. MI 5 joints 2-3/8" tubing. Check and record tubing, casing and bradenhead pressures.

2. Blow well down and kill well with fresh water.
3. ND WH. NU and pressure test BOP.
4. TOH and lay down rods and pump. PU and TIH to tag bottom. Circulate wellbore with fresh water.
5. Spot a 68 sx type II cement plug inside the casing from 1,020'-1,710' to cover the Fruitland Coal formation and the top Pictured Cliffs formation.
6. TOH with tubing to $\pm 700'$. Reverse circulate tubing clean.
WOC. TIH and tag cement top.
8. TOH and lay down tubing to 575'.
9. Establish circulation out the casing valve. Pump a 50 sx type II cement plug inside casing from 575' to surface cover the top of the Kirtland and the Ojo Alamo formations. Circ cement out casing valve. TOH and lay down tubing.
10. Cut off wellhead and install P&A marker. Cement marker with 10 sx cement.
11. RDMO PU.

WELL NAME 1 E H. B. McC Grady A
 SEC, TWN, RNG. 14-27N-12W



SURFACE CASING

SIZE HOLE _____"

SIZE CASING _____"

Annular Volume _____ $\text{ft}^3/\text{ft.}$

Cement _____ SK

Volume _____ ft^3

INTERMEDIATE CASING

SIZE HOLE _____"

SIZE CASING _____"

Annular Volume _____

Cement _____ SK

Volume _____