

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. 10 2009

SUBMIT IN TRIPLICATE - Other instructions on page 2 of this Manual  
Farmington Field Office

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No 7960041910 14-20-603-2199
2. Name of Operator XTO ENERGY INC.		6. If Indian, Allottee or Tribe Name NAVAJO LAND
3a. Address 382 CR 3100 AZTEC, NM 87410	3b. Phone No. (include area code) 505-333-3100	7. If Unit or CA/Agreement, Name and/or No
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1760' FSL & 835' FEL NESE SEC. 21 (I) -T29N-R14W N.M.P.M.		8. Well Name and No. NW CHA CHA #24
		9. API Well No 30-045-07990
		10. Field and Pool, or Exploratory Area GALLUP
		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 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 checked="" 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 MIT TEST
	<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 recompletable 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.)

XOT Energy Inc., has performed the MIT inspection per the Navajo Nation EPA. See attached report.

RCVD AUG 21 '09

OIL CONS. DIV.  
DIST. 3

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) BARBARA J CONDER		Title REGULATORY CLERK
Signature <i>Barbara J Conder</i>		Date 08/12/09
THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved by		Title Date
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 FIELD OFFICE

NMOC

# U.S. ENVIRONMENTAL PROTECTION AGENCY

## NOTICE OF INSPECTION

Address (EPA Regional Office) Region 9 Environmental Inspection Agency 75 Hawthorne Street (MTR-9) San Francisco, CA 94105		Inspection Contractor NAVAJO NATION EPA- UNDERGROUND INJECTION CONTROL PO Box 1999 Shiprock, New Mexico 87420-1999	Firm To Be Inspected XTO GROUP PO Box 690698 Houston, Texas 77264-0698
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Date 5/19/99 Hour 11:25	Notice of inspection is hereby given according to Section 1445(b) of the Safe Drinking Water Act (42 U.S.C. §3001 et seq.)
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Reason For Inspection

For the purpose of inspecting records, files, papers, processes, controls and facilities, and obtaining samples to determine whether the person subject to an applicable underground injection control program has acted or is acting in compliance with the Safe Drinking Water Act and any applicable permit or rule.

MIT Inspection of XTO Energy, NAVAJO and Unit 65-112  
 following inspection of 100 wells.

Well #	Location	Notes
Well #34	NESE 5-21-T29N, R14W	Well #34
	NESE 5-22-T29N, R14W	Well #35

MIT Test  
 for O<sub>2</sub> & H<sub>2</sub>S  
 MTR-9  
 MTR-9  
 MTR-9  
 MTR-9

is quoted on the reverse of this form

Receipt of this Notice of Inspection is hereby acknowledged

Firm Representative Date Inspector
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# ANNULAR PRESSURE TEST

(Mechanical Integrity Test)

Operator XTO Energy, Inc. Date of Test 5/19/09

Well Name NW 1/4 Sec 21, T29N, R14W EPA Permit No. \_\_\_\_\_

Location NFSE Sec. 21, T29N, R14W Tribal Lease No. 14-20-603-2195

State and County San Juan Co., New Mexico

Continuous Recorder? YES ☒ NO ☐

Pressure Gauge? YES ☒ NO ☐

Bradenhead Opened? YES ☒ NO ☐

Fluid Flow? YES ☐ NO ☒

TIME	ANNULUS PRESSURE, psi		TUBING PRESSURE, psi
	CHART	Gauge (0-600)	(0-60)
10:00 AM	530	500	2 psi

MAX. INJECTION PRESSURE: 1050 PSI

MAX. ALLOWABLE PRESSURE CHANGE: 26.50 PSI (TEST PRESSURE X 0.05)

REMARKS: Passed? ☒ Failed? ☐ If failed, cease injection until well passes MIT (40CFR§144.21(c)(6)).

Leakage pressure = 0 psi  
Failed MIT => Equal casing & tubing pressure.  
Shot - H  
HDM Process Products, Inc => Pump Truck  
Kyver Energy Services, Inc => Contract Pumping. XTO San Juan, Denver.

COMPANY REPRESENTATIVE: Heroy Lee (Print and Sign)

DATE 5/19/09

INSPECTOR: James Lee (Print and Sign)

DATE 5/19/09

# ANNULAR PRESSURE TEST

(Mechanical Integrity Test)

Operator XTO Energy Inc Date of Test 2-2-04 2004

Well Name N. 10 E. 22 N. 11 W. #24 EPA Permit No. \_\_\_\_\_

Location N. 10 E. 22 N. 11 W. Tribal Lease No. \_\_\_\_\_

State and County San Juan County, New Mexico

Continuous Recorder? YES ☒ NO ☐

Pressure Gauge? YES ☒ NO ☐

Bradenhead Opened? YES ☒ NO ☐

Fluid Flow? YES ☐ NO ☒

TIME	ANNULUS PRESSURE, psi		TUBING PRESSURE, psi
	gauge	recorder	gauge
10 15 AM	529	514	
10 20 AM	565	510	
10 25 AM	529	572	
10 30 AM	525	573	
10 35 AM	585	573	
10 40 AM	525	572	
10 45 AM	525	570	

MAX. INJECTION PRESSURE: \_\_\_\_\_ PSI

MAX. ALLOWABLE PRESSURE CHANGE: 20 PSI (TEST PRESSURE X 0.05)

REMARKS: (Passed? Failed? If failed, cease injection until well passes MIT (40CFR§144.21(c)(6)).

CSG only no Tbg TA

0.12 5084

1.48 1017

COMPANY REPRESENTATIVE: (Print and Sign)

DATE

INSPECTOR: (Print and Sign)

DATE