Form 3160-5 (August 2007)

entitle the applicant to conduct operations thereon

UNITED STATES RECORD TMENT OF THE INTERIOR Clean-4P DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO 1004-0137 Expires July 31, 2010

5 Lease Serial No

SUNDRY NOTICES AND REPORTS ON WELLS					NMNM-19163		
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					If Indian, Allottee or Tribe Name If Unit or CA/Agreement, Name and/or No.		
							1 Type of Well
Oil Well X Gas Well Other Name of Operator IIIN 0 9 2010					8 Well Name and No WF FEDERAL 20 #1		
2 Name of Operator			JÚN				
XTO ENERGY INC. 3a Address		3b Phone N	SECTION OF THE	mrell, i literature Co	ParaPl Well No).	
382 CR 3100 AZTEC, NM 87410	3b Phone No Marchille College College State College Co			1930-045-29649			
4. Location of Well (Footage, Sec., T., R., M., or Survey).	303-353-3170			10 Field and Pool, or Exploratory Area BASIN FRUITLAND COAL/TWIN			
915' FSL & 1600' FWL SESW SEC.2	N.M.P.I	N.M.P.M.			MOUNDS FRUITLAND SAND PC		
220.2					11. County or Parish, State		
					SAN JUAN	NM	
12 CHECK APPROPRIATE	E BOX(ES) TO IN	DICATE NA	TURE OF NO	TICE, REPO	RT, OR OTHE	CR DATA	
TYPE OF SUBMISSION	<u> </u>			OF ACTION			
THE OF GODINISHON							
Notice of Intent	Acidize	Deep	en	Production	(Start/Resume)	Water Shut-Off	
	Alter Casing	Fract	me Treat	Reclamatio	n	Well Integrity	
X Subsequent Report	Casing Repair	New	Construction	Recomplet	ė	X Other RWIP	
To the state of th	Change Plans	Plug and Abandon		Temporaril	Temporarily Abandon		
Γιπαl Abandonment Notice	Convert to Injecti	on Dhug	Back	Water Disp	ooeal		
9	Convert to injecti	on Ling		water Dist			
testing has been completed. Final Abandonment leadermined that the final site is ready for final inspection., has returned this	ction)				n, have been cor	npieted, and the operator has	
					RCVD JUN 14'10 OIL CONS. DIV.		
						DIST. 3	
14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) TEENA M. WHITING		Title	REGULATO	ORY COMPLI			
Signature Seena m. Whit	tino	Date	6/8/2010	ACC	EPTED FOR	RECOND	
THIS	S SPACE FOR FEL	DERAL OR	STATE OFFI	CE USE	11112 4 0	1040	
Approved by		Ti	le		JUN TO	Wind	
Conditions of approval, if any, are attached Approval of this not	ice does not warrant or cert	tify that	fice	FAR!	Wis		
the applicant holds legal or equitable title to those rights in the su		01		BY	(M	\wp	