

PNRM 0723454385

C-103 Received 8-20-2007

DHC No. Assigned 8-21-2007

Order Number		API Number	Operator		County			
HOB-0212		30-025-38088	XTO Energy, Inc.		Lea			
Order Date		Well Name		Number	Location			
		SDE 31 Federal		017	G	31	235	32E
					UL	Sec	T (+Dir)	R (+Dir)
Pool 1				Oil %	Gas %			
	59945	Triste Draw Delaware, W		89%	27%			
Pool 2								
	53805	Sand Dunes Bone Spring, S,		11%	73%			
Pool 3								
Pool 4								
Comments: Work completed effective _____ Work cancelled effective _____								

Posted to
RBM &
8-22-2007

B

30-025-38088
HOB-0212

DOWNHOLE COMMINGLE CALCULATIONS:

OPERATOR: XTO Energy Inc.

PROPERTY NAME: SDE 31 Federal

WNULSTR: 17-G; 31-23-32

SECTION I:

59945 POOL NO. 1 Triste Draw Delaware, West 187 374 MCF 2000

53805 POOL NO. 2 Sand Dunes Bone Spring, South 365 730 MCF 2000

POOL NO. 3 _____ MCF

POOL NO. 4 _____ MCF

POOL TOTALS 552 1104

SECTION II:

POOL NO. 1 Triste Draw Delaware, West 89%

POOL NO. 2 Sand Dunes Bone Spring, South 11%

POOL NO. 3 _____

POOL NO. 4 _____

Oil Gas
27% 73%

OIL

GAS

SECTION III:

$187 \div 89\% = 210.112 (211)$

SECTION IV:

$211 \times 89\% = 187.79 (188)$

$211 \times 11\% = 23.21 (23)$

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
1000 Rio Brazos Rd., Aztec, NM 87410
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-38088
5. Indicate Type of Lease <i>Federal</i> STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	7. Lease Name or Unit Agreement Name: SDE 31 Federal
2. Name of Operator XTO Energy, Inc.	8. Well Number 17
3. Address of Operator 200 N. Loraine, Ste. 800 Midland, TX 79701	9. OGRID Number 005380
4. Well Location Unit Letter <u>G</u> : <u>1900'</u> feet from the <u>North</u> line and <u>2310'</u> feet from the <u>East</u> line Section <u>31</u> Township <u>23S</u> Range <u>32E</u> NMPM County <u>Lea</u>	10. Pool name or Wildcat Triste Draw W; Sand Dunes; Bone Sp. So
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
OTHER: _____	DHC <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: Reactivate Bone Spring, Add Pay in Delaware <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1. Division Order No. R11363
2. Pools: Triste Draw; Delaware West (59945) & Sand Dunes; Bone Spring, South (53805)
3. Delaware Perfs: 7240'-8307' & Bone Spring Perfs: 8620'-8635'
4. Allocations based on Well Tests (prior to well being downhole commingled).
Bone Spring - 11% Oil, 73% Gas, 2% Water
Delaware - 89% Oil, 27% Gas, 98% Water

DHC Order No. HOB-0212

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Kristy Ward TITLE Regulatory Analyst DATE 07/24/07
E-mail address: kristy_ward@xtoenergy.com
Telephone No. 432-620-6740

For State Use Only

APPROVED BY Chris Williams TITLE OCD DISTRICT SUPERVISOR/GENERAL MANAGER DATE AUG 21 2007
Conditions of Approval, if any:

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1300 Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

Form C-102
Revised October 12, 2005

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-38088	² Pool Code 59945	³ Pool Name Triste Draw; Delaware, West
⁴ Property Code 300729	⁵ Property Name SDE "31" Federal	⁶ Well Number 17
⁷ OGRID No. 005380	⁸ Operator Name XTO Energy, Inc.	⁹ Elevation 3596'

¹⁰ Surface Location

UL or lot no. G	Section 31	Township 23S	Range 32E	Lot. Idn	Feet from the 1900'	North/South line North	Feet from the 2310'	East/West line East	County Lea
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South line	Feet from the	East/West line	County
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¹² Dedicated Acres 40	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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

¹⁶		¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. Signature Date 07/24/07 Printed Name Kristy Ward Regulatory Analyst
		¹⁸ 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, and that the same is true and correct to the best of my belief. Date of Survey Signature and Seal of Professional Surveyer Certificate Number

District I
1625 N. French Dr., Hobbs, NM 88240
District II
13 Grand Avenue, Artesia, NM 88210
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State of New Mexico
Energy, Minerals & Natural Resources

Form C-102
Revised October 12, 2005

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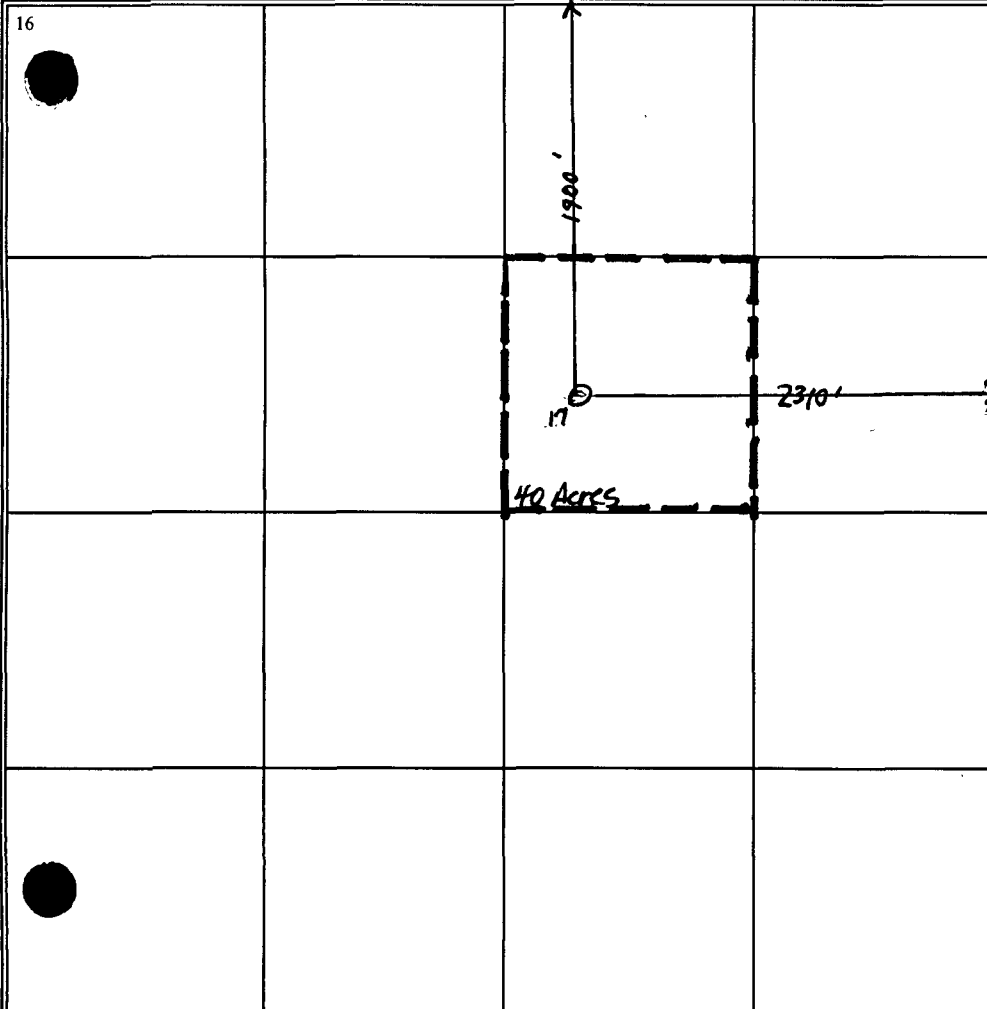
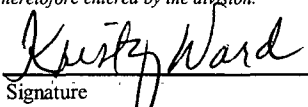
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