

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W 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

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

Form C-104
Revised August 1, 2011

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address XTO ENERGY INC 500 W. ILLINOIS SUITE 100 MIDLAND, TEXAS 79701		² OGRID Number 05380
		³ Reason for Filing Code/Effective Date NW
⁴ API Number 30-0 15-42921	⁵ Pool Name WILLOW LAKE, BONE SPRING SE	⁶ Pool Code 96217
⁷ Property Code 314121	⁸ Property Name CORRAL CANYON FEDERAL	⁹ Well Number 2H

II. Surface Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
N	5	25-S	29-E		110	SOUTH	1810	WEST	EDDY

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
K	32	24-S	29-E		2438	SOUTH	2033	WEST	EDDY
¹² Lse Code 239.44- F	¹³ Producing Method Code F	¹⁴ Gas Connection Date	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
282612	MUREX PETROLEUM CORPORATION 365 NORTH SAM HOUSTON PKWY SUITE 200 HOUSTON, TEXAS 77060	O
036785	DCP MIDSTREAM, L.P 5718 WESTHEIMER, STE 2000 HOUSTON, TEXAS 77057	G

IV. Well Completion Data

²¹ Spud Date 09/09/2016	²² Ready Date 12/20/2016	²³ TD 15900/8524	²⁴ PBDT	²⁵ Perforations 9125-15,763	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2	13 3/8	642	694		
12 1/4	9 5/8	2813	950		
8 1/2	5 1/2	15894	3085		

V. Well Test Data

³¹ Date New Oil 12/22/2016	³² Gas Delivery Date 12/22/2016	³³ Test Date 01/13/2017	³⁴ Test Length 24hr	³⁵ Tbg. Pressure 1500	³⁶ Csg. Pressure 0
³⁷ Choke Size 33.0/64	³⁸ Oil 1007	³⁹ Water 1067	⁴⁰ Gas 1059.58	⁴¹ Test Method F	

⁴¹ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Patricia Donald*

Printed name:
PATRICIA DONALD

Title:
REGULATORY ANALYST

E-mail Address
PATRICIA_DONALD@XTOENERGY.COM

Date: **03/29/2017**

Phone: **432-571-8220**

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Raymond W. Padany

Geologist

4/6/2017

Pending BLM approvals will
subsequently be reviewed
and scanned

Form 3160-5
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

Bold* fields are required.

Section 1 - Completed by Operator

1. BLM Office*

Carlsbad, NM

2. Well Type*

OIL

3. Submission Type*

- ☐ Notice of Intent
☒ Subsequent Report

4. Action*

Production Start-up

Operating Company Information

5. Company Name*

XTO ENERGY INC

6. Address*

500 W. ILLINOIS SUITE 100

7. Phone Number*

432-571-8220

MIDLAND TX 79707

Administrative Contact Information

8. Contact Name*

PATRICIA DONALD

9. Title*

REGULATORY ANALYST

10. Address*

500 W. ILLINOIS SUITE 100

11. Phone Number*

432-571-8220

MIDLAND TX 79707

12. Mobile Number

13. E-mail*

PATRICIA_DONALD@XTOENERGY.COM

14. Fax Number

Technical Contact Information

☒ Check here if Technical Contact is the same as Administrative Contact.

15. Contact Name*

16. Title*

17. Address*

18. Phone Number*

20. E-mail*

21. Fax Number

Lease and Agreement

22. Lease Serial Number*

Pending BLM approvals will
subsequently be reviewed
and scanned *RUF*

NMNM15302

24. If Unit or CA/Agreement, Name and/or Number

25. Field and Pool, or Exploratory Area*
WILLOW LAKE-BONESPRINGSE

County and State for Well

26. County or Parish, State*

EDDY NM

Associated Well Information

27. Specify well using one of the following methods:

- a) Well Name, Well Number, API Number, Section, Township, Range, Qtr/Qtr, N/S Footage, E/W Footage
 b) Well Name, Well Number, API Number, Latitude, Longitude, Metes & Bounds description

Well Name* CORRAL CANYON FEDERAL		Well Number* 2H	API Number 30-015-42921
Section 32	Township 24S	Range 29E	Meridian
Qtr/Qtr —	N/S Footage 2438 FSL		E/W Footage 2033 FWL
Latitude —	Longitude —	Metes and Bounds	

28. 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 recompleate horizontally, give subsurface locations and measured and true vertical depths of all markers and zones. Attach the Bond under which the work will be performed or provide the Bond Number on file pertinent 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 recompleation 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.

11/09/2016: MIRU LOAD AND PRESSURE TEST TO 8850

11/28/2016-12/03/2016-STARTED STIMULATION OPERATION. 24 STAGES. 104.4M POUNDS OF SAND. 259,000 BBLS OF WATER. 630 GALS OF ACID.

12/04/2016- RIG DOWN FRAC

12/16-12/17/2016- WELL IS READY FOR FLOW BACK OPERATIONS.

I hereby certify that the foregoing is true and correct.

29. Name*

PATRICIA P DONALD

30. Title

REGULATORY ANALYST

31. Date* (MM/DD/YYYY)

04/04/2017

Today

32. Signature*

You have the ability to sign this form only if a SmartCard or digital certificate has been issued to you.

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.

Section 2 - System Receipt Confirmation**33. Transaction**
_____**34. Date Sent**
_____**35. Processing Office**
_____**Section 3 - Internal Review #1 Status****36. Review Category**
_____**37. Date Completed**
_____**38. Reviewer Name**
_____**39. Comments**

Section 4 - Internal Review #2 Status**40. Review Category**
_____**41. Date Completed**
_____**42. Reviewer Name**
_____**43. Comments**

Section 5 - Internal Review #3 Status**44. Review Category**
_____**45. Date Completed**
_____**46. Reviewer Name**
_____**47. Comments**

Section 6 - Internal Review #4 Status**48. Review Category**
_____**49. Date Completed**
_____**50. Re**
_____**51. Comments**

Pending BLM approvals will
subsequently be reviewed
and scanned *RWP*

Section 7 - Final Approval Status			
52. Disposition	53. Date Completed	54. Reviewer Name	55. Reviewer Title
56. Comments			

GENERAL INSTRUCTIONS

This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated on Federal and Indian lands pursuant to applicable Federal law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard local area, or regional procedures and practices, either are shown below will be issued by, or may be obtained from the local Federal office.

SPECIFIC INSTRUCTIONS

Item 27 - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

Item 28 - Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by the local Federal office. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well and date well site conditioned for final inspection looking to approval of the abandonment.

NOTICE

The Privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c) and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

EFFECT OF NOT PROVIDING THE INFORMATION: Filing of this notice and report and disclosure of the information is mandatory for those subsequent well operations specified in 43 CFR 3162.3-2, 3162.3-3, 3162.3-4.

The Paperwork Reduction Act of 1995 requires us to inform you that:

This information is being collected to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

Response to this request is mandatory.

BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

BURDEN HOURS STATEMENT

Public reporting burden for this form is estimated to average 25 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0135), Bureau Information Collection Clearance Officer, (WO-630), Mail Stop 401 LS, 1849 C St., N.W., LS, Washington D.C. 20240

Form 3160-4
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RE-COMPLETION REPORT AND LOG

Bold* fields are required.

Section 1 - Completed by Operator

1. BLM Office*
Carlsbad, NM

2. Well Type*
OIL

3. Completion Type*
New Well

Operating Company Information

4. Company Name*
XTO ENERGY

5. Address*
500 W ILLINOIS SUITE 100

MIDLAND TX 79701

6. Phone Number*
432-571-8220

Administrative Contact Information

7. Contact Name*
PATRICIA _ DONALD

9. Address*
500 W. ILLINOIS SUITE 100

MIDLAND TX 79701

12. E-mail*
PATRICIA_DONALD@XTOENERGY.COM

8. Title*
REGULATORY ANALYST

10. Phone Number*
432-571-8220

11. Mobile Number

13. Fax Number

Technical Contact Information

☒ Check here if Technical Contact is the same as Administrative Contact.

14. Contact Name*

16. Address*

19. E-mail*

15. Title*

17. Phone Number*

18. Mobile Number

20. Fax Number

Pending BLM approvals will
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and scanned

Surface Location

21. Specify location using one of the following methods:

- a) State, County, Section, Township, Range, Meridian, N/S Footage, E/W Footage, with Qtr/Qtr, Lot, or Tract
- b) State, County, Latitude, Longitude, Metes & Bounds description

State*
NM

County or Parish*
EDDY

Section 5	Township 25S	Range 29E	Meridian	
Qtr/Qtr	Lot # N	Tract #	N/S Footage 110 FSL	E/W Footage 1810 FWL
Latitude	Longitude	Metes and Bounds		

Producing Interval Location

22. Specify location or

☐ Check here if the producing hole location is the same as the surface location.

State* NM	County or Parish* EDDY			
Section 32	Township 24S	Range 29E	Meridian	
Qtr/Qtr	Lot # K	Tract #	N/S Footage 2438 FSL	E/W Footage 2033 FWL
Latitude	Longitude	Metes and Bounds		

Bottom Location

23. Specify location or

☐ Check here if the bottom hole location is the same as the surface location.

State* NM	County or Parish* EDDY			
Section 32	Township 24S	Range 29E	Meridian	
Qtr/Qtr	Lot # K	Tract #	N/S Footage 2438 FSL	E/W Footage 2033 FWL
Latitude	Longitude	Metes and Bounds		

Lease and Agreement

24. Lease Serial Number*

NMNM15302

26. If Unit or CA/Agreement, Name and/or Number

27. Field and Pool, or Exploratory Area*
WILLOW LAKE-BONE SPRINGSE

Well

28. Well Name* CORRAL CANYON FEDERAL	29. Well Number* 2H	30. API Number 30-015-42921	
31. Date Spudded 09/19/2016	32. Date T.D. Reached 10/04/2016	33. Date Completed 12/17/2016	34. Elevations (DF, RKB, RT, GL) 2941 Ground Level
		<input type="checkbox"/> Dry & Abandoned <input type="checkbox"/> Ready to Produce	
35. Total Depth: MD 15900 TVD 7602	36. Plug Back Total Depth: MD TVD	37. Depth Bridge Plug Set: MD TVD	
38. Type Electric & Other Mechanical Logs Run		39.	

Date First Produced	Test Date	Hours Tested	Test Production	Oil (BBL)	Gas (MCF)	Water (BBL)	Oil Gravity	Corr. API	Gas Gravity
_____	_____	_____	>>>>>	_____	_____	_____	_____	_____	_____
Choke Size	Tubing Pressure Flowing / Shut In	Casing Pressure	24 Hour Rate	Oil (BBL)	Gas (MCF)	Water (BBL)	Gas/Oil Ratio		
_____	_____	_____	>>>>>	_____	_____	_____	_____		

Date First Produced	Test Date	Hours Tested	Test Production	Oil (BBL)	Gas (MCF)	Water (BBL)	Oil Gravity Corr. API	Gas Gravity
			>					
Choke Size	Tubing Pressure Flowing / Shut In	Casing Pressure	24 Hour Rate	Oil (BBL)	Gas (MCF)	Water (BBL)	Gas/Oil Ratio	
			>					

Date First Produced	Test Date	Hours Tested	Test Production	Oil (BBL)	Gas (MCF)	Water (BBL)	Oil Gravity Corr. API	Gas Gravity
_____	_____	_____	>>>>>>	_____	_____	_____	_____	_____
Choke Size	Tubing Pressure Flowing / Shut In	Casing Pressure	24 Hour Rate	Oil (BBL)	Gas (MCF)	Water (BBL)	Gas/Oil Ratio	
_____	_____	_____	>>>>>	_____	_____	_____	_____	_____

[illegible]

47

54. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☐ Electrical/Mechanical Logs (1 full set req'd.) ☐ Geologic Report ☐ DST Report ☐ Directional Survey
☐ Sundry Notice for plugging and cement verification ☐ Core Analysis ☐ Other:

I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

55. Name

PATRCIA P DONALD

56. Title

REGULATORY ANALYST

57. Date* (MM/DD/YYYY)

04/04/2017

58. Signature*

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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.

Section 2 - System Receipt Confirmation

59. Transaction

60. Date Sent

61. Processing Office

Section 3 - Internal Review #1 Status

62. Review Category

63. Date Completed

64. Reviewer Name

65. Comments

Section 4 - Internal Review #2 Status

66. Review Category _____	67. Date Completed _____	68. Reviewer Name _____
69. Comments 		

Section 5 - Internal Review #3 Status

70. Review Category _____	71. Date Completed _____	72. Reviewer Name _____
73. Comments 		

Section 6 - Internal Review #4 Status

74. Review Category _____	75. Date Completed _____	76. Reviewer Name _____
77. Comments 		

Section 7 - Final Approval Status

78. Disposition _____	79. Date Completed _____	80. Reviewer Name _____	81. Reviewer Title _____
82. Comments 			

INSTRUCTIONS

GENERAL: This form is designed for submitting a complete and correct well completion/recompletion report and log on all types of wellson Federal and Indian leases to a Federal agency, pursuant to applicable Federal laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal office.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, and all types electric), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal laws and regulations. All attachments should be listed on this form, see item 33.

ITEMS 24, 22, and 23: Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local Federal office for specific instructions.

ITEM 34: Indicate which reported elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

ITEM 40: Show how reported top(s) of cement were determined, i.e. circulated (CIR), or calculated (CAL), or cement bond log (CBL), or temperature survey (TS).