

Form 3160-4  
(August 2007)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NM OIL CONSERVATION  
ARTESIA DISTRICT

JUL 24 2017

RECEIVED

**WELL COMPLETION OR RE-COMPLETION REPORT AND LOG**

**Bold\*** fields are required.

| Section 1 - Completed by Operator  |  |
|--|--|
| <b>1. BLM Office*</b><br>Carlsbad, NM  | <b>2. Well Type*</b><br>OIL              |
| <b>3. Completion Type*</b><br>New Well   |  |
| Operating Company Information  |  |
| <b>4. Company Name*</b><br>XTO ENERGY INC  |  |
| <b>5. Address*</b><br>500 W. ILLINOIS SUITE 100<br>MIDLAND TX 79701  | <b>6. Phone Number*</b><br>432-571-8220  |
| Administrative Contact Information   |  |
| <b>7. Contact Name*</b><br>PATRICIA P DONALD   | <b>8. Title*</b><br>REGULATORY ANALYST   |
| <b>9. Address*</b><br>500 W. ILLINOIS SUITE 100<br>MIDLAND TX 79701  | <b>10. Phone Number*</b><br>432-571-8220 |
|  | <b>11. Mobile Number</b><br>_____        |
| <b>12. E-mail*</b><br>PATRICIA_DONALD@XTOENERGY.COM  | <b>13. Fax Number</b><br>_____           |
| Technical Contact Information  |  |
| <input checked="" type="checkbox"/> Check here if Technical Contact is the same as Administrative Contact. |  |
| <b>14. Contact Name*</b><br>_____  | <b>15. Title*</b><br>_____               |
| <b>16. Address*</b><br>_____<br>_____<br>_____   | <b>17. Phone Number*</b><br>_____        |
|  | <b>18. Mobile Number</b><br>_____        |
| <b>19. E-mail*</b><br>_____  | <b>20. Fax Number</b><br>_____           |
| 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

|                     |                                  |                  |                        |                        |
|---------------------|----------------------------------|------------------|------------------------|------------------------|
| <b>State*</b><br>NM | <b>County or Parish*</b><br>EDDY |                  |                        |                        |
| Section<br>25       | Township<br>26S                  | Range<br>29E     | Meridian               |                        |
| Qtr/Qtr<br>—        | Lot #<br>—                       | Tract #<br>—     | N/S Footage<br>170 FNL | E/W Footage<br>380 FWL |
| Latitude<br>—       | Longitude<br>—                   | Metes and Bounds |                        |                        |

Producing Interval Location

22. Specify location or  
 Check here if the producing hole location is the same as the surface location.

|                     |                                  |                  |                         |                         |
|---------------------|----------------------------------|------------------|-------------------------|-------------------------|
| <b>State*</b><br>NM | <b>County or Parish*</b><br>EDDY |                  |                         |                         |
| Section<br>36       | Township<br>26S                  | Range<br>29E     | Meridian                |                         |
| Qtr/Qtr<br>—        | Lot #<br>—                       | Tract #<br>—     | N/S Footage<br>236. FSL | E/W Footage<br>440. FWL |
| Latitude<br>—       | Longitude<br>—                   | Metes and Bounds |                         |                         |

Bottom Location

23. Specify location or  
 Check here if the bottom hole location is the same as the surface location.

|                     |                                  |                  |                        |                        |
|---------------------|----------------------------------|------------------|------------------------|------------------------|
| <b>State*</b><br>NM | <b>County or Parish*</b><br>EDDY |                  |                        |                        |
| Section<br>36       | Township<br>26S                  | Range<br>39E     | Meridian               |                        |
| Qtr/Qtr<br>—        | Lot #<br>—                       | Tract #<br>—     | N/S Footage<br>236 FSL | E/W Footage<br>440 FWL |
| Latitude<br>—       | Longitude<br>—                   | Metes and Bounds |                        |                        |

Lease and Agreement

|  |   |
|--|---|
| <b>24. Lease Serial Number*</b><br>NMNM35607           |   |
| <b>26. If Unit or CA/Agreement, Name and/or Number</b> | <b>27. Field and Pool, or Exploratory Area*</b><br>WOLFCAMP |

Well

|  |                               |                                       |
|--|-------------------------------|---------------------------------------|
| <b>28. Well Name*</b><br>ROSS DRAW 25 2H | <b>29. Well Number*</b><br>2H | <b>30. API Number</b><br>30-015-43472 |
|--|-------------------------------|---------------------------------------|

|                                |                                     |  |   |
|--------------------------------|-------------------------------------|--|---|
| 31. Date Spudded<br>10/11/2016 | 32. Date T.D. Reached<br>11/06/2016 | 33. Date Completed<br>06/29/2017<br><input type="checkbox"/> Dry & Abandoned<br><input checked="" type="checkbox"/> Ready to Produce | 34. Elevations (DF, RKB, RT, GL)<br>2927 Ground Level |
|--------------------------------|-------------------------------------|--|---|

|   |   |   |
|---|---|---|
| 35. Total Depth:<br>MD 16700<br>TVD 10374 | 36. Plug Back Total Depth:<br>MD _____<br>TVD _____ | 37. Depth Bridge Plug Set:<br>MD _____<br>TVD _____ |
|---|---|---|

|  |   |
|--|---|
| 38. Type Electric & Other Mechanical Logs Run<br>(Submit copy of each)<br>GRMD | 39.<br>Was Well Cored? <input checked="" type="radio"/> No <input type="radio"/> Yes (Submit Analysis)<br>Was DST run? <input checked="" type="radio"/> No <input type="radio"/> Yes (Submit Report)<br>Directional Survey? <input checked="" type="radio"/> No <input type="radio"/> Yes (Submit Copy) |
|--|---|

40. Casing and Liner Record (Report all strings set in well)

| Hole Size | Casing Size | Grade   | Wt. (#/ft.) | Top (MD) | Bottom (MD) | Stage Cementer Depth | No. of Sk. | Slurry Vol. (BBL) | Cement Top | Amount Pulled |
|-----------|-------------|---------|-------------|----------|-------------|----------------------|------------|-------------------|------------|---------------|
| 17.5      | 13.375      | H40     | 48          | 90       | 365         | ___                  | 380        | ___               | 195        | ___           |
| 12.25     | 8.75        | J55     | 40          | 365      | 3106        | ___                  | 1060       | ___               | 0          | ___           |
| 8.75      | 7           | CYP 110 | 29          | 3106     | 10446       | ___                  | 920        | ___               | 1640       | ___           |
| 6.125     | 4.5         | HC110   | 13.5        | 10446    | 16700       | ___                  | 725        | ___               | 3000       | ___           |
| ___       | ___         | ___     | ___         | ___      | ___         | ___                  | ___        | ___               | ___        | ___           |
| ___       | ___         | ___     | ___         | ___      | ___         | ___                  | ___        | ___               | ___        | ___           |

|                   |                |                   |                         |          |             |
|-------------------|----------------|-------------------|-------------------------|----------|-------------|
| 41. Tubing Record |                |                   | 42. Producing Intervals |          |             |
| Size              | Depth Set (MD) | Packer Depth (MD) | Formation               | Top (MD) | Bottom (MD) |
| 2.875             | 9710           | ___               | A) WOLFCAMP             | 11223    | 16510       |
| ___               | ___            | ___               | B) _____                | ___      | ___         |
| ___               | ___            | ___               | C) _____                | ___      | ___         |
| ___               | ___            | ___               | D) _____                | ___      | ___         |

43. Perforation Record

| Top   | Bottom | Size | No. Holes | Perf. Status |
|-------|--------|------|-----------|--------------|
| 11223 | 11662  | ___  | 9         | ACTIVE       |
| 11700 | 16510  | ___  | 48        | ACTIVE       |
| ___   | ___    | ___  | ___       | ___          |
| ___   | ___    | ___  | ___       | ___          |

44. Acid, Fracture, Treatment, Cement Squeeze, etc.

| Top   | Bottom | Amount and Type of Material                          |
|-------|--------|--|
| 11223 | 11662  | FRAC JOB 342 # OF SAND 8000 GALS OF WATER            |
| 11700 | 16510  | 4,000# OF SAND 714 GAL OF ACID, 104,958 GAL OF WATER |
| ___   | ___    | ___  |

|  |  |  |  |  |                                   |  |  |  |
|--|--|--|--|--|-----------------------------------|--|--|--|
| 45. Production Method and Well Status for Production Intervals |  |  |  |  |                                   |  |  |  |
| Production Method<br>Flows From Well                           |  |  |  |  | Well Status<br>Producing Oil Well |  |  |  |

| 46. Production - Interval A |                                   |                 |                 |           |           |             |                       |             |
|-----------------------------|-----------------------------------|-----------------|-----------------|-----------|-----------|-------------|-----------------------|-------------|
| Date First Produced         | Test Date                         | Hours Tested    | Test Production | Oil (BBL) | Gas (MCF) | Water (BBL) | Oil Gravity Corr. API | Gas Gravity |
| 06/29/2017                  | 07/14/2017                        | 24              | >>>>>           | 701       | 2603      | 2553        | 36                    |             |
| Choke Size                  | Tubing Pressure Flowing / Shut In | Casing Pressure | 24 Hour Rate    | Oil (BBL) | Gas (MCF) | Water (BBL) | Gas/Oil Ratio         |             |
| 28/64                       | 2110                              |                 | 28              | >>>>>     | 701       | 2603        | 2553                  |             |

| 47. Production - Interval B |                                   |                 |                 |           |           |             |                       |             |
|-----------------------------|-----------------------------------|-----------------|-----------------|-----------|-----------|-------------|-----------------------|-------------|
| 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         |             |
|                             |                                   |                 |                 | >>>>>     |           |             |                       |             |

| 48. Production - Interval C |                                   |                 |                 |           |           |             |                       |             |
|-----------------------------|-----------------------------------|-----------------|-----------------|-----------|-----------|-------------|-----------------------|-------------|
| 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         |             |
|                             |                                   |                 |                 | >>>>>     |           |             |                       |             |

| 49. Production - Interval D |                                   |                 |                 |           |           |             |                       |             |
|-----------------------------|-----------------------------------|-----------------|-----------------|-----------|-----------|-------------|-----------------------|-------------|
| 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         |             |
|                             |                                   |                 |                 | >>>>>     |           |             |                       |             |

50. Disposition of Gas (Sold, used for fuel, vented, etc.)  
Captured

| 51. Summary of Porous Zones (Include Aquifers):<br>Show all important zones of porosity and contents thereof. Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries. |     |        |                              |  | 52. Formation (Log) Markers |          |
|--|-----|--------|------------------------------|--|-----------------------------|----------|
| Formation  | Top | Bottom | Descriptions, Contents, etc. |  | Name                        | Top (MD) |
|  |     |        |                              |  |                             |          |

|               |      |       |       |               |      |
|---------------|------|-------|-------|---------------|------|
| SALADO        | 516  | 1241  | _____ | SALADO        | 516  |
| CASTILE       | 1242 | 3065  | _____ | CASTILE       | 1242 |
| LAMAR         | 3066 | 3112  | _____ | LAMAR         | 3066 |
| BELL CANYON   | 3113 | 3968  | _____ | BELL CANYON   | 3113 |
| CHERRY CANYON | 3969 | 5643  | _____ | CHERRY CANYON | 3969 |
| BRUSHY CANYON | 5644 | 6809  | _____ | BRUSHY CANYON | 5644 |
| BSPG          | 6810 | 1008  | _____ | BSPG          | 6810 |
| WOLFCAMP      | 1009 | _____ | _____ | WOLFCAMP      | 1009 |

53. Additional remarks (include plugging procedure):

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  
 Core Analysis   
  Other:

Sundry Notice for plugging and cement verification

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

**55. Name**  
PATRICIA \_ DONALD

**56. Title**  
REGULATORY ANALYST

**57. Date\*** (MM/DD/YYYY)  
07/19/2017

**58. 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**

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  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

| <b>Section 6 - Internal Review #4 Status</b> |                             |                            |
|--|-----------------------------|----------------------------|
| 74. Review Category<br>_____                 | 75. Date Completed<br>_____ | 76. Reviewer Name<br>_____ |
| 77. Comments<br><br>                         |                             |                            |

| <b>Section 7 - Final Approval Status</b> |                             |                            |                             |
|--|-----------------------------|----------------------------|-----------------------------|
| 78. Disposition<br>_____                 | 79. Date Completed<br>_____ | 80. Reviewer Name<br>_____ | 81. Reviewer Title<br>_____ |
| 82. Comments<br><br>                     |                             |                            |                             |

**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).

**PRIVACY ACT**

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 to be used to evaluate the actual operations performed in the drilling, completing and testing of a well on a Federal or Indian lease.

**ROUTINE USES:** (1) Evaluate the equipment and procedures used during the drilling and completing/recompleting of a well. (2) The review of geologic zones and formation encountered during drilling. (3) Analyze future applications to drill in light of data obtained and methods used. (4) (5) 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.

**EFFECT OF NOT PROVIDING THE INFORMATION:** Filing of this report and disclosure of the information is mandatory once a well drilled on a Federal or Indian lease is completed/recompleted.

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

This information is being collected to allow evaluation of the technical, safety, and environmental factors involved with drilling and completing/recompleting wells on Federal and Indian oil and gas leases.

This information will be used to analyze operations and to compare equipment and procedures actually used with those proposed and approved.

Response to this request is mandatory only if the operator elects to initiate drilling completing/recompleting and operations on an oil and gas lease.

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 60 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 (1004-0137), Bureau Information Collection Clearance Officer, (WO-630), MS 401 LS, 1849 C Street, N.W., Washington, D.C. 20240.