

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 Feb. 26, 2007

HOBBS OGD
DEC 10 2015
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Submit to Appropriate District Office
5 Copies

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1 Operator name and Address XTO Energy Inc. 500 W. Illinois St Ste 100 Midland, TX 79701		2 OGRID Number 005380
4 API Number 30-0 25-42710		3 Reason for Filing Code/Effective Date NW
5 Pool Name Lea; Bone Spring	6 Pool Code 37570	
7 Property Code 39834	8 Property Name Perla Negra Federal Com	9 Well Number 3H

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
O	24	19S	24E		200	South	2000	East	Lea

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
B	24	19S	34E		195	North	1920.2	East	Lea

12 Lse Code	13 Producing Method Code F	14 Gas Connection Date	15 C-129 Permit Number	16 C-129 Effective Date	17 C-129 Expiration Date
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III. Oil and Gas Transporters

18 Transporter OGRID	19 Transporter Name and Address	20 O/G/W
005108	Sentinel Transportation, LLC 4001 E. 42nd Street, Ste 307 Odessa, TX 79762	O
159160	Targa Midstream Services Limited Partnership 1000 Louisiana, Ste 4300 Houston, TX 77002	G

IV. Well Completion Data

21 Spud Date	22 Ready Date	23 TD	24 PBDT	25 Perforations	26 DHC, MC
08/21/2015	11/06/2015	15,493'-10,895'	15,362'/10,895'	11,200-15,348'	N/A

27 Hole Size	28 Casing & Tubing Size	29 Depth Set	30 Sacks Cement
17-1/2	13-3/8" 54.5# J-55 BTC	1850'	1538x, 365sx circ
12-1/4	9-5/8" 40# J-55 LTC	4080'	901sx, 34sx circ
8-3/4	5-1/2" 17# CYP-110 BTC	15,493'	2098sx. TOC: 420'
N/A	2-7/8" L-80	10,335'	N/A

V. Well Test Data

31 Date New Oil	32 Gas Delivery Date	33 Test Date	34 Test Length	35 Tbg. Pressure	36 Csg. Pressure
11/6/2015	11/7/2015	11/20/2015	24hrs	911	

37 Choke Size	38 Oil	39 Water	40 Gas	41 Test Method
20/64	854	304	423	

42 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: <i>Stephanie Rabadue</i> Printed name: Stephanie Rabadue Title: Regulatory Analyst E-mail Address: stephanie.rabadue@xtoenergy.com Date: 12/05/2015	OIL CONSERVATION DIVISION Approved by: <i>[Signature]</i> Title: Petroleum Engineer Approval Date: 12/5/2015
	Phone: 432-620-6714
	E-PERMITTING -- New Well _____ Comp <u>Pi</u> P&A _____ TA _____ CSNG <u>Pm</u> Loc Chng _____ ReComp _____ Add New Well _____ Canc Well _____ Create Pool _____

DEC 21 2015

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0135
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.

5. Lease Serial No.
NMNM0381550C

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
PERLA NEGRA FEDERAL COM 3H

2. Name of Operator
XTO ENERGY, INC
Contact: STEPHANIE RABADUE
E-Mail: stephanie_rabadue@xtoenergy.com

9. API Well No.
30-025-42710

3a. Address
500 W. ILLINOIS ST STE 100
MIDLAND, TX 79701

3b. Phone No. (include area code)
Ph: 432-620-6714

10. Field and Pool, or Exploratory
LEA; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 24 T19S R34E Mer NMP 200FSL 2000FEL

11. County or Parish, and State
LEA COUNTY, 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 Well Spud
	<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 recomplete 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 site is ready for final inspection.)

08/21/2015: Spud well. Drill 17-1/2" hole to 1130'.
 08/22-08/24/2015: Con't drilling 17-1/2" hole to 1850'. Set 13-3/8" 54.5# J-55 BTC surface csg at 1850'. Cmt w/1538sx CI C, circ 365sx to surf. WOC. Tested csg. Good test.
 08/25-08/28/2015: Drill 12-1/4" intermediate hole to 4079'. Set 9-5/8" 40# J-55 LTC csg at 4080'. Cmt csg w/801sx CI C Lead & 100sx CI C Tail, circ 34sx to surf. WOC. Tested good. Begin drilling 8-3/4" prod hole.
 08/29-09/17/2015: Drill & ream 8-3/4" production hole to 15,493'. Set 5-1/2" 17# CYP-110 BTC prod csg at 15,493'. Cmt csg w/823sx Type I Lead & 1275sx CI H Tail. 167sx returned to surf. TOC: Unknown. CBL will be run on completion.

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #325413 verified by the BLM Well Information System For XTO ENERGY, INC, sent to the Hobbs

Name (Printed/Typed) STEPHANIE RABADUE	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 12/03/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
Accepted for Record Only		
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 _____

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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD

DEC 10 2015

RECEIVED

FORM APPROVED
OMB NO. 1004-0135
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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM0381550C
2. Name of Operator XTO ENERGY, INC Contact: STEPHANIE RABADUE E-Mail: stephanie_rabadue@xtoenergy.com		6. If Indian, Allottee or Tribe Name
3a. Address 500 W. ILLINOIS ST STE 100 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-620-6714	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 24 T19S R34E Mer NMP 200FSL 2000FEL		8. Well Name and No. PERLA NEGRA FEDERAL COM 3H
		9. API Well No. 30-025-42710
		10. Field and Pool, or Exploratory LEA; BONE SPRING
		11. County or Parish, and State LEA COUNTY, 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 Production Start-up
	<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 recomplete 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 site is ready for final inspection.)

09/23/2015: Run CBL. TOC: 420?
10/06-10/09/2015: Prep for frac.
10/23-10/28/2015: MIRU frac equip. Prep for frac. Test lines to 9500psi. Perf & Plug Frac well in 15 stages fr/11,200-15,348? w/5,513,660lbs Ottawa 20/40 Sand; 10,080gals HCl 10% acid & 73,903gals slickwater.
10/29-11/06/2015: MIRU Equip for CO. CO well. RIH w/tbg & pkr. Set pkr @ 10,335?
11/07/2015: Well on prod. Flowing.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #325570 verified by the BLM Well Information System For XTO ENERGY, INC, sent to the Hobbs	
Name (Printed/Typed) STEPHANIE RABADUE	Title REGULATORY ANANLYST
Signature (Electronic Submission)	Date 12/05/2015

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.		Accepted for Record Only
		Office _____

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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

DEC 10 2015

Form 3160-4
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOGS RECEIVED

5. Lease Serial No.
NNMN0381550C

1a. Type of Well Oil Well Gas Well Dry Other
 b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.
 Other _____

6. If Indian, Allottee or Tribe Name
7. Unit or CA Agreement Name and No.

2. Name of Operator XTO ENERGY, INC Contact: STEPHANIE RABADUE
 E-Mail: stephanie_rabadue@xtoenergy.com

8. Lease Name and Well No. PERLA NEGRA FEDERAL COM 3H

3. Address 500 W. ILLINOIS ST STE 100 MIDLAND, TX 79701 3a. Phone No. (include area code) Ph: 432-620-6700
 9. API Well No. 30-025-42710

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
 At surface 200FSL 2000FEL
 At top prod interval reported below 801FSL 1990FEL
 At total depth 195FNL 1920FEL

10. Field and Pool, or Exploratory LEA; BONE SPRING
 11. Sec., T., R., M., or Block and Survey or Area Sec 24 T19S R34E Mer NMP
 12. County or Parish LEA 13. State NM

14. Date Spudded 08/21/2015 15. Date T.D. Reached 09/14/2015 16. Date Completed D & A Ready to Prod. 11/06/2015
 17. Elevations (DF, KB, RT, GL)* 3784 GL

18. Total Depth: MD 15493 TVD 10895 19. Plug Back T.D.: MD 15362 TVD 10895 20. Depth Bridge Plug Set: MD TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each) CBL 22. Was well cored? No Yes (Submit analysis)
 Was DST run? No Yes (Submit analysis)
 Directional Survey? No Yes (Submit analysis)

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

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J-55	54.5	0	1850	0	1538		0	0
12.250	9.625 J-55	40.0	0	4080	0	901		0	0
8.750	5.500 CYP-110	17.0	0	15493	0	2098		420	0

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	10335	10335						

25. Producing Intervals			26. Perforation Record			
Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	8191	11034	11200 TO 15348			PRODUCING
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
11200 TO 15348	FRAC WELL IN 15 STAGES FR/11,200-15,348 W/5,513,660LBS OTTAWA 20/40 SAND; 10,080GALS HCL 10% ACID

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
11/06/2015	11/20/2015	24	→	854.0	423.0	304.0	39.6		FLOWS FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
20/64	911 SI		→	854	423	304	495	POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #325571 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

Accepted for Record Only

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
SOLD

30. Summary of Porous Zones (Include Aquifers):

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.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
RUSTLER	0	1791			
CASTILE	1792	3483			
SEVEN RIVERS	3484	4032			
QUEEN	4033	4724			
DELAWARE	4725	6331			
BRUSHY CANYON	6332	8190			
BONE SPRING	8191	11034			

32. Additional remarks (include plugging procedure):

33. Circle enclosed attachments:

- | | | | |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.) | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis | 7. Other: | |

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

**Electronic Submission #325571 Verified by the BLM Well Information System.
For XTO ENERGY, INC, sent to the Hobbs**

Name (please print) STEPHANIE RABADUE Title REGULATORY ANALYST

Signature _____ (Electronic Submission) Date 12/05/2015

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.

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