

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.

HOBBS
MAY 16 2017
RECEIVED

5. Lease Serial No.
NMLC031740B ✓

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit or CA/Agreement, Name and/or No.
NM 709482

8. Well Name and No.
EUNICE MONUMENT SOUTH UNIT 208 ✓

9. API Well No.
30-025-04470 ✓

1. Type of Well
 Oil Well Gas Well Other

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

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 Area
EUNICE MONUMENT

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 4 T21S R36E Mer NMP 4620FSL 660FEL ✓

11. County or Parish, State
LEA COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing | <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 type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input checked="" 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 recompleat 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

12/28/2016: MIRU. POOH w/prod. equip.
12/29/2006: RIH w/5.5" CIBP. Set @ 3630' w/35' via wireline.
12/30/2016: Call BLM. Left msg. No contact made. Run MIT to 500psi. Held good.

Good chart attached.

TA status accepted for record for the period of 12/30/2016 - 12/30/2017

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #364480 verified by the BLM Well Information System
For XTO ENERGY, INC, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 02/03/2017 ()

Name (Printed/Typed) STEPHANIE RABADUE

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 01/21/2017

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.

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.

ACCEPTED FOR RECORD
APR 28, 2017
PR Swartz
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

(Instructions on page 2)

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

Accepted for Record Only

MSB/OCD

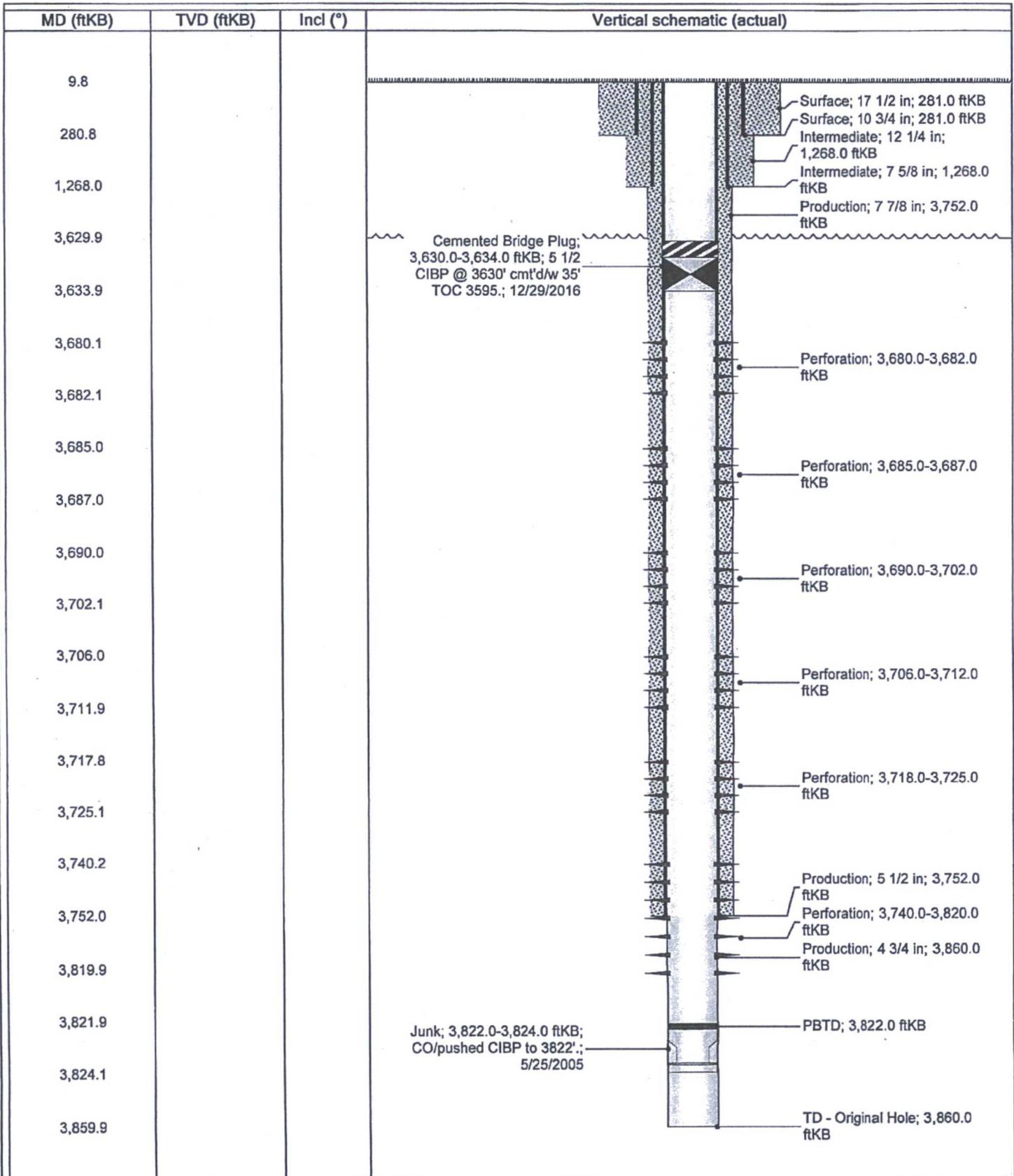
RE 5/17/2017



Schematic - Vertical with Perfs

Well Name: EUNICE MONUMENT SO. UNIT 208

| | | | | |
|-----------------------|------------------------------|--|------------------------------|----------------------------------|
| API/UVI 3002504470 | Accounting ID 110938 | Permit Number | State/Province New Mexico | County Lea |
| Location | Spud Date 4/30/1936 00:00 | Original KB Elevation (ft) 3,548.00 | Gr Elev (ft) 3,538.00 | KB-Ground Distance (ft) 10.00 |



PRINTED IN U.S.A.

6 PM

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MIDNIGHT

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6 AM

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NOON

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900
800
700
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APLZ-360-25044
SEC. 9 - FALS - R 3100
600-300-300

AK OIS

DATE R-30-19
BR 2221

Ensign
Sofman

Graphic Controls
EMSU 208

500-300-300
400-300-300
300-300-300
200-300-300
100-300-300

Call
R-4-119

AK OIS

