

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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 OGD**  
**NMNM57285**  
**Hobbs**  
**MAY 29 2018**  
**RECEIVED**

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM57285
2. Name of Operator XTO ENERGY INC. Contact: PATRICIA DONALD E-Mail: PATRICIA_DONALD@XTOENERGY.COM		6. If Indian, Allottee or Tribe Name
3a. Address 500 W. ILLINOIS SUITE 100 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-571-8220	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 23 T19S R34E 275FSL 1640FEL		8. Well Name and No. ESPEJO FEDERAL COM 3H
		9. API Well No. 30-025-43777
		10. Field and Pool or Exploratory Area LEA; BONE SPRING
		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 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 recomplate 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 recompletion 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.

XTO ENERGY INC. SUBMITES THIS SUNDRY TO REPORT THE SPUD OF THE REFERENCED WELL.

**SPUD DATE:**  
1/11/2018 @0630am  
1/11-1/14/2018: Spud well drilled 17 1/2 hole from surface to 1897'. Set 13 3/8, 54.5#, j55 casing at 1897'. Cmted casing with 1,625sx of class C. 349SX returned to surface. WOC. tested casing 1000psi, for 30 min.  
01/14-01/17/2017: Drilled 12 1/4 hole from 1897-4000'. set 9 5/8, 40H, J55, N80 casing set at 4000'. CMT casing with 914sx of 35/65 POZ, and 265sx class C. circulated 148sx to surface. WOC. Tested Casing 1500psi for 30 min. Test is good.  
01/17-02/04/2018: Drilled 8 3/4 hole from 4,000-16,092'. Set 5 1/2, 17#, CYP110 casing at 16092. Set casing with 1405sx of class H cement and 717sx of 50/50POZ. WOC. calculated TOC at 3,000. Rig Release on 02/04/2018 @22:30.

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

**Electronic Submission #404052 verified by the BLM Well Information System For XTO ENERGY INC., sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 02/15/2018 ()**

Name (Printed/Typed) PATRICIA DONALD	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 02/09/2018

**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 _____		_____

**RECEIVED FOR RECORD**  
**MAY 21 2018**  
**CARL SRAB FIELD 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.

(Instructions on page 2)

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

*KS*