

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO 1004-0137  
Expires March 31, 2007

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.

RECEIVED  
MAY 05 2009  
HOBBSD

5 Lease Serial No  
NM-62666  
6 If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2 Name of Operator  
XTO Energy Inc.

3a Address  
200 LORAIN, STE. 800 MIDLAND, TX 79701

3b Phone No (include area code)  
432-620-6740

4 Location of Well (Footage, Sec, T, R., M., or Survey Description)  
1980 Feet from the South line and 1980 Feet from the East line; Unit Letter J, Section 24, T-20-S, R-36-E, NMPM, Lea County, New Mexico

7. If Unit or CA/Agreement, Name and/or No.  
NM 70948B

8. Well Name and No.  
EUNICE MONUMENT 911

SOUTH UNIT B

9. API Well No.  
30-025-04311

10 Field and Pool, or Exploratory Area  
EUNICE MONUMENT; GRAYBURG  
SAN ANDRES

11 County or Parish, State  
LEA NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐ Notice of Intent  
☒ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

☐ Acidize ☐ Deepen ☐ Production (Start/Resume) ☐ Water Shut-Off  
☐ Alter Casing ☐ Fracture Treat ☐ Reclamation ☐ Well Integrity  
☐ Casing Repair ☐ New Construction ☐ Recomplete ☐ Other  
☐ Change Plans ☒ Plug and Abandon ☐ Temporarily Abandon  
☐ Convert to Injection ☐ Plug Back ☐ 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 shall 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 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 final site is ready for final inspection.)

04/03/09 MIRU. ND WH. NU BOP. MI & rack 127 jts of 2-7/8" L-80 WS. PU & RIH w/66 jts. PU & RIH w/2-7/8" L-80 tbg. Tag CIBP @ 3,721'. RU pmp equipment, circ TCA w/145 bbls 10# drlg mud. Spot 80 sks Class "C" w/2% CaCl @ 3,721'. RIH & tag cmt plug @ 3,222'. PUH, spot 65 sks "C" w/2% CaCl @ 2,615'. POOH, wash up pump equipment.

04/04/09 RIH w/2-7/8" L-80 tbg & tag cmt plug @ 2,231'. POOH w/tbg. RU & RIH w/perf gun, shoot 4 sqz holes @ 1,500'. POOH, RD. PU & RIH w/7" Ten Pkr & 2-7/8" tbg, set pkr @ 1,098'. RU pmp equipment. Pump 120 sks Class "C" w/2% CaCl & displace w/7-1/2 BFW down 2-7/8" tbg & circ out 9-5/8" csg @ 200 psig. Wash up pmp equip. Open tbg/csg & bleed off press w/no back flow, release pkr.

04/07/09 RU WL trk. RIH & tag cmt @ 1,129'. PUH & perf @ 500' w/4 circ holes. POOH & RD WL. Pump 4 BFW down 7" csg & brk circ out 9-5/8". Close in 9-5/8" csg & brk circ out 13" csg. Pmpd 170 sks Class "C" cmt w/2% CaCl down 7" csg & circ out 9-5/8" w/5 bbls to 1/2 pit. Shut in 9-5/8" csg. Pmpd 240 sks Class "C" w/2% CaCl down 7" csg & circ out 13" csg. Circ out 70 bbls of prod wtr fr 13" csg to pit. Did not circ cement out 13" csg. Per BLM. RIH & tag cnt, report to BLM.

Approved as to plugging of the well bore.  
Liability under bond is retained until  
Surface restoration is completed.

Continued on Next Page.

14 I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Kristy Ward

Title

Regulatory Analyst

Date 04/23/09

APPROVED

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

DISTRICT 1 SUPERVISOR

Office

Date 1 2009

JAMES A. AMOS  
SUPERVISOR ERS

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.

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, makes 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.

**EMSUB #911**  
**Plug & Abandonment**  
**04/23/09**

- 04/08/09 RU WL & RIH, tag cmt plug in 7" csg @ 104' FS, POOH, RD WL. RU pump equipment. Tst 7" csg to 500 psig for 10 min w/no loss. RU on 13" surface csg. Pump 1-1/2 BFW & circ out around 13" csg. RDMO PU. Lufkin Trkg rig down Mark 2 pmpg units & moved off. Backhoe dug out 9-5/8" & 13" wellheads.
- 04/09/09 RU, check LEL's & fill out hot work permit. Cut off 7", 9-5/8" & 13-3/8" wellheads. Prep to 1" cmt in 13-3/8" surface csg.
- 04/10/09 RU pmp equipment. PU 1" pipe & RI 13" 9-5/8" annulus, tag cement plug @ 31' FS. Pump 10 sks Class "C" down 1" pipe & circ out 13" surface csg. POOH w/1" pipe. RI w/1" pipe down 9-5/8" - 7" annulus, tag cement plug @ 31' FS, pump 10 sks Class "C" down 1" pipe & circ out 9-5/8" csg. POOH w/1" pipe. RI w/1" pipe down 7" csg & tag cement plug @ 102' FS. Pump 30 sks Class "C" down 1" pipe & circ out 7" csg. POOH w/1" pipe. Wash up & RD pump equipment.
- 04/22/09 Dryhole marker installed. Anchors removed, location remediated & reseeded. P&A complete.

District I  
1625 N French Dr., Hobbs, NM 88240  
District II  
1301 W Grand Avenue, Artesia, NM 88210  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
District IV  
1220 S St Francis Dr., Santa Fe, NM 87505

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State of New Mexico  
Energy Minerals and Natural Resources  
Department  
Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-144 CLEZ  
July 21, 2008

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOC District Office.

### Closed-Loop System Permit or Closure Plan Application

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

Type of action: ☒ Permit ☒ Closure

Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.

1.  
Operator: XTO Energy, Inc OGRID #: 005380  
Address: 200 N. Loraine, Ste. 800 Midland, TX 79705  
Facility or well name: Eunice Monument South Unit B #911  
API Number: 30-025-04311 OCD Permit Number: PI-01003  
U/L or Qtr/Qtr J Section 24 Township T-20S Range R-36E County: Lea  
Center of Proposed Design: Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ NAD: ☐ 1927 ☐ 1983  
Surface Owner: ☒ Federal ☐ State ☐ Private ☐ Tribal Trust or Indian Allotment

2.  
☒ **Closed-loop System:** Subsection H of 19.15.17.11 NMAC  
Operation: ☐ Drilling a new well ☐ Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) ☒ P&A  
☒ Above Ground Steel Tanks or ☐ Haul-off Bins

3.  
**Signs:** Subsection C of 19.15.17.11 NMAC  
12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers  
☒ Signed in compliance with 19.15.3.103 NMAC

4.  
**Closed-loop Systems Permit Application Attachment Checklist:** Subsection B of 19.15.17.9 NMAC  
Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.  
☒ Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC  
☒ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC  
☒ Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC  
☐ Previously Approved Design (attach copy of design) API Number: \_\_\_\_\_  
☐ Previously Approved Operating and Maintenance Plan API Number: \_\_\_\_\_

5.  
**Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:** (19.15.17.13.D NMAC)  
Instructions: Please identify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required.  
Disposal Facility Name: Sundance Services, Inc. Disposal Facility Permit Number: NM-01-0003  
Disposal Facility Name: \_\_\_\_\_ Disposal Facility Permit Number: \_\_\_\_\_  
Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?  
☐ Yes (If yes, please provide the information below) ☒ No  
Required for impacted areas which will not be used for future service and operations:  
☐ Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC  
☐ Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC  
☐ Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

6.  
**Operator Application Certification:**  
I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.  
Name (Print): Kristy Ward Title: Regulatory Analyst  
Signature: Kristy Ward Date: February 20, 2009  
e-mail address: kristy.ward@xtoenergy.com Telephone: 432-620-6740

7. **OCD Approval:** ☒ Permit Application (including closure plan) ☐ Closure Plan (only)

OCD Representative Signature: \_\_\_\_\_

Approval Date: 04/01/09

Title: \_\_\_\_\_

**Geologist**

OCD Permit Number: P1-01003

8. **Closure Report (required within 60 days of closure completion):** Subsection K of 19.15 17.13 NMAC

*Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed.*

☒ Closure Completion Date: 4-22-09

9. **Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:**

*Instructions: Please identify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.*

Disposal Facility Name: Sundance Services, Inc.

Disposal Facility Permit Number: NM-01-0003

Disposal Facility Name: \_\_\_\_\_

Disposal Facility Permit Number: \_\_\_\_\_

Were the closed-loop system operations and associated activities performed on or in areas that *will not* be used for future service and operations?

☐ Yes (If yes, please demonstrate compliance to the items below) ☒ No

*Required for impacted areas which will not be used for future service and operations:*

☐ Site Reclamation (Photo Documentation)

☐ Soil Backfilling and Cover Installation

☐ Re-vegetation Application Rates and Seeding Technique

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**Operator Closure Certification:**

I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan

Name (Print): Kristy Ward

Title: Regulatory Analyst

Signature: \_\_\_\_\_

Date: 4-23-09

e-mail address: kristy-ward@xtbenergy.com

Telephone: 432-620-6740



## **Closure Report**

Solids and Fluids were removed from steel tanks and hauled off by trucking companies and taken to.

Disposal Facility Name: Sundance Services, Inc.

Disposal Facility Permit Number: NM-01-0003