

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>Injection</u>		5. Lease Serial No. NMLC 0301438
2. Name of Operator XTO Energy Inc.		6. If Indian, Allottee or Tribe Name
3a. Address 200 N. Loraine, Ste. 800 Midland, TX 79701	3b. Phone No. (include area code) 432-620-6740	7. If Unit or CA/Agreement, Name and/or No. NM709488
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit Ltr. M, Section 23, T-20S, R-36E 660' FSL & 660' FWL		8. Well Name and No. Eunice Monument 918 South Unit B
		9. API Well No. 30-025-04302
		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	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 <u>To Repair</u>
	<input type="checkbox"/> Change Plans <input type="checkbox"/> Plug and Abandon <input type="checkbox"/> Temporarily Abandon <u>Injector</u>
	<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 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.)

New MIT Chart ran on 8-10-09 - Chart Attached

Performed new MIT per the request of BLM - Test was ran for 30 mins. with no loss.

Well is ready to RTWI.

AUG 19 2009

/s/ Chris Walls

Petroleum Engineer

RECEIVED

AUG 25 2009

HOBBSOCD

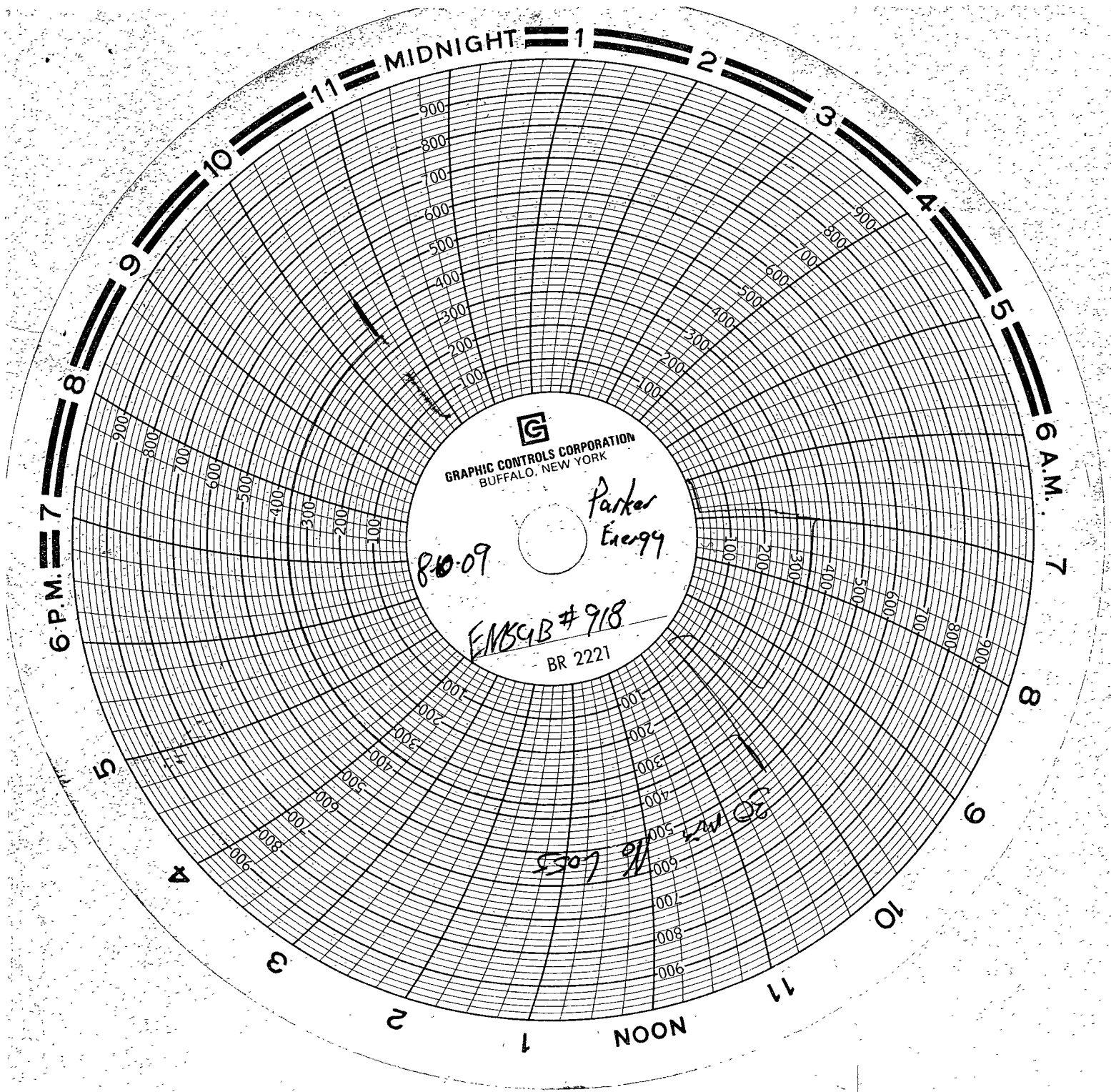
\* Rejected \*  
MIT must be tested to 500 psi for 30 min. and must be witnessed by BLM.  
Retest well within 30 days or by 9/19/09

\* BLM ORDER Not Met! 8-27-09

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Kristy Ward	Title Regulatory Analyst
<u>Kristy Ward</u>	Date 8/12/09

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by <u>[Signature]</u>	Title DISTRICT 1 SUPERVISOR	Date AUG 28 2009
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.		



**G**  
GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

*Parker  
Energy*

*8-10-09*

*EMBGB #918*

BR 2221

*30 min  
16 hrs*

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

OPERATOR'S COPY

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.**

REC'D/MIDLAND

JUL 30 2009

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other

Injection

2. Name of Operator

XT0 Energy Inc.

3a. Address

200 N. Loraine, 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)

Unit Ltr. M, Section 23, T-20S, R-36E  
660' FSL & 660' FWL

Lease Serial No.

NMLC030143B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
NM70948B

8. Well Name and No.

Eunice Monument 918  
South Unit B

9. API Well No.

30-025-0429304302

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

- |                                               |                                           |                                                    |                                                            |
|-----------------------------------------------|-------------------------------------------|----------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off                    |
| <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity                    |
| <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input checked="" type="checkbox"/> Other <u>To Repair</u> |
| <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       | <u>Injector</u>                                            |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            |                                                            |

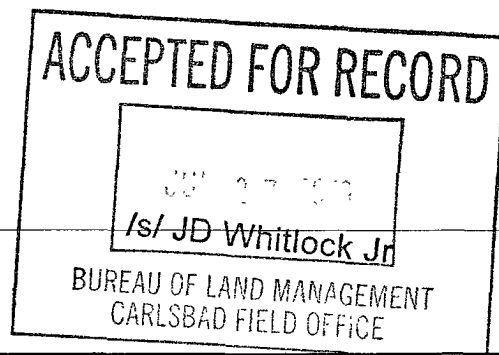
13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths 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 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.)

MIT Chart ran on 6-11-09 - Chart Attached

6/11/09 - Performed MIT. Pressured up on well to 540 psig. Well bled down from 540# to 520# in 30 mins.  
Mark Whitaker was present and witnessed the test.

Repair leak prior to returning well to injection. Retest well. Notify This office to witness test. Work to be done within 30 days or by 8/27/09

**SUBJECT TO LIKE  
APPROVAL BY STATE**



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

Kristy Ward

Title

Regulatory Analyst

Date 07/14/09

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, 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.