

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

received
05/07/2010
document
200247117
facility- pit - 292547

SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

1. OGCC Operator Number: 100264	4. Contact Name Kelly Kardos	Complete the Attachment Checklist
2. Name of Operator: XTO ENERGY INC.	Phone: (505) 333-3145	
3. Address: 382 CR 3100	Fax: 505-213-0546	OP OGCC
City: AZTEC State: NM Zip: 87410		
5. API Number 05- 071-08472	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: HILL RANCH	7. Well/Facility Number 15-11	Directional Survey
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): NESW SEC 15, T35S, R67W 6 PM		Surface Eqpmt Diagram
9. County: LAS ANIMAS	10. Field Name: PURGATOIRE RIVER	Technical Info Page
11. Federal, Indian or State Lease Number:		Other

General Notice

<input type="checkbox"/> CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)																					
Change of Surface Footage from Exterior Section Lines:	<table><tr><td></td><td>FNL/FSL</td><td></td><td>FEL/FWL</td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr></table>		FNL/FSL		FEL/FWL																
	FNL/FSL		FEL/FWL																		
Change of Surface Footage to Exterior Section Lines:																					
Change of Bottomhole Footage from Exterior Section Lines:																					
Change of Bottomhole Footage to Exterior Section Lines:																					
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer																					
Latitude	Distance to nearest property line																				
Longitude	Distance to nearest bldg, public rd, utility or RR																				
Ground Elevation	Distance to nearest lease line																				
	Is location in a High Density Area (rule 603b)? Yes/No																				
	Distance to nearest well same formation																				
	Surface owner consultation date:																				
GPS DATA:																					
Date of Measurement	PDOP Reading Instrument Operator's Name																				
<input type="checkbox"/> CHANGE SPACING UNIT	<input type="checkbox"/> Remove from surface bond																				
Formation Formation Code Spacing order number Unit Acreage Unit configuration	Signed surface use agreement attached																				
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	<input type="checkbox"/> CHANGE WELL NAME																				
Effective Date:	From:																				
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	To:																				
	Effective Date:																				
<input type="checkbox"/> ABANDONED LOCATION:	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS																				
Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date well shut in or temporarily abandoned:																				
Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No																				
Date Ready for Inspection:	MIT required if shut in longer than two years. Date of last MIT																				
<input type="checkbox"/> SPUD DATE:	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)																				
<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK	*submit cbl and cement job summaries																				
Method used Cementing tool setting/perf depth Cement volume Cement top Cement bottom Date																					
<input type="checkbox"/> RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.																					
Final reclamation will commence on approximately	<input type="checkbox"/> Final reclamation is completed and site is ready for inspection.																				

Technical Engineering/Environmental Notice

<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Report of Work Done	
Approximate Start Date:	Date Work Completed: 07/07/2009	
Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)		
<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Install Pit Liner	for Spills and Releases

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: Kelly Kardos Date: 04/20/2010 Email: kelly_kardos@xtoenergy.com
Print Name: Kelly K. Kardos Title: Sr. Permitting Tech

COGCC Approved: Title Date:

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1. OGCC Operator Number:	100264	API Number:	05-071-08472
2. Name of Operator:	XTO ENERGY INC.	OGCC Facility ID #	
3. Well/Facility Name:	HILL RANCH	Well/Facility Number:	15-11
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	NESW SEC 15, T35S, R67W 6 PM		

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

The production pit on this location has been lined with a 40 mil LLDPE liner (with 8oz nonwoven geotextile padding) due to the intermittent paraffin produced by the well