

State of Colorado
Oil and Gas Conservation Commission

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



01	02	03	04
RECEIVED			
9/26/2012			

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 Designer (Rule 603b.)

1. OGCC Operator Number: 100264	4. Contact Name: Jessica Dooling
2. Name of Operator: XTO Energy Inc.	Phone: 970-675-4122
3. Address: PO Box 6501	Fax: 970-675-4150
City: Englewood State: CO Zip: 80155	
6. API Number: 05-103-10635-00	OGCC Facility ID Number: []
6. Well/Facility Name: Federal	7. Well/Facility Number: 1-96-23-12
8. Location (Qtr/Sec, Twp, Rng, Meridian): SWNW, 23, 1S, 96W, 6th	
9. County: Rio Blanco	10. Field Name: Dark Canyon
11. Federal, Indian or State Lease Number: COC81464	

Complete the Attachment Checklist

OP OGCC

Survey Plat		
Directional Survey		
Surface Eqmnt Diagram		
Technical Info Page		
Other		

location ID # 335700

General Notice

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:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Surface Footage to Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Bottomhole Footage from Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Change of Bottomhole Footage to Exterior Section Lines:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Bottomhole location Qtr/Sec, Twp, Rng, Mer: _____ attach directional survey

Latitude _____ Distance to nearest property line _____ Distance to nearest bldg, public rd, utility or RR _____
 Longitude _____ Distance to nearest lease line _____ Is location in a High Density Area (rule 603b)? Yes/No _____
 Ground Elevation _____ Distance to nearest well same formation _____ Surface owner consultation date: _____

GPS DATA:
 Date of Measurement _____ PDOP Reading _____ Instrument Operator's Name _____

CHANGE SPACING UNIT
 Formation _____ Formation Code _____ Spacing order number _____ Unit Acreage _____ Unit configuration _____

Remove from surface bond
 Signed surface use agreement attached

CHANGE OF OPERATOR (prior to drilling):
 Effective Date: _____
 Plugging Bond: Blanket Individual

CHANGE WELL NAME NUMBER
 From: _____
 To: _____
 Effective Date: _____

ABANDONED LOCATION:
 Was location ever built? Yes No
 Is site ready for inspection? Yes No
 Date Ready for inspection: _____

NOTICE OF CONTINUED SHUT IN STATUS
 Date well shut in or temporarily abandoned: _____
 Has Production Equipment been removed from site? Yes No
 MIT required if shut in longer than two years. Date of last MIT _____

SPUD DATE: _____ **REQUEST FOR CONFIDENTIAL STATUS** (6 mos from date casing set)

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

RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.
 Final reclamation will commence on approximately _____ Final reclamation is completed and site is ready for inspection

Technical Engineering/Environmental Notice

Notice of Intent Approximate Start Date: _____ Report of Work Done Date Work Completed: _____

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: See Page 2	for Spills and Releases

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

Signed: Jessica Dooling Date: 9/26/2012 Email: jessica.dooling@xtoenergy.com
 Print Name: Jessica Dooling Title: Environmental Coordinator

OGCC Approved: Chris Canfield Title: FOR Date: 10/02/2012

CONDITIONS OF APPROVAL, IF ANY:

Chris Canfield

FORM
4
Rev 12/05

TECHNICAL INFORMATION PAGE

FOR OGCC USE ONLY

- | | | | |
|--|------------------------|-----------------------|-----------------|
| 1. OGCC Operator Number: | 100264 | API Number: | 05-103-10635-00 |
| 2. Name of Operator: | XTO Energy Inc. | OGCC Facility ID # | |
| 3. Well/Facility Name: | Federal | Well/Facility Number: | 1-96-23-12 |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): | SWNW, 23, 1S, 96W, 6th | | |

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.

DESCRIBE PROPOSED OR COMPLETED OPERATIONS

XTO Energy completed closure of the Partially Buried Tank Pit on the Federal 1-96-23-12 location on 9/26/2012 in accordance with COGCC 900 and 1000 Series Rules.

XTO herein requests No Further Action (NFA) for REM #7327/DOC #2230553.