



RECEIVED 9/19/2012

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 Designee (Rule 603b.)

1. OGCC Operator Number: 100264 4. Contact Name: Jessica Dooking
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
5. API Number 05-103-01097-00 OGCC Facility ID Number
6. Well/Facility Name: Piceance Creek Unit 7. Well/Facility Number: T45X-18G
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): NESW, 18, 2S, 96W, 6th
9. County: Rio Blanco 10. Field Name: Piceance Creek Unit
11. Federal, Indian or State Lease Number: COD052141

Complete the Attachment Checklist
OP OGCC
Survey Plat
Directional Survey
Surface Eqpm Diagram
Technical Info Page
Other

Location ID # 314279

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: ☐ ☐ ☐ ☐
Change of Surface Footage to Exterior Section Lines: ☐ ☐ ☐ ☐
Change of Bottomhole Footage from Exterior Section Lines: ☐ ☐ ☐ ☐
Change of Bottomhole Footage to Exterior Section Lines: ☐ ☐ ☐ ☐ attach directional survey
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer: _____
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.)
☐ Intent to Recomplete (submit form 2) ☐ Request to Vent or Flare ☐ E&P Waste Disposal
☐ Change Drilling Plans ☐ Repair Well ☐ Beneficial Reuse of E&P Waste
☐ Gross Interval Changed? ☐ Rule 502 variance requested ☐ Status Update/Change of Remediation Plans
☐ Casing/Cementing Program Change ☒ Other: See Page 2 for Spills and Releases

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

Signed: _____ Date: 9/17/2012 Email: jessica.dooking@xtoenergy.com
Print Name: Jessica Dooking Title: Environmental Coordinator

OGCC Approved: Chris Canfield Title: FOR Date: 09/20/2012
CONDITIONS OF APPROVAL, IF ANY:
Chris Canfield
EPS NW Region



TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

- | | | | |
|--|------------------------|-----------------------|-----------------|
| 1. OGCC Operator Number: | 100264 | API Number: | 05-103-01097-00 |
| 2. Name of Operator: | XTO Energy Inc. | OGCC Facility ID # | 314279 |
| 3. Well/Facility Name: | Piceance Creek Unit | Well/Facility Number: | PCU T45X-18G |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): | NESW, 18, 2S, 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 PCU T45X-18G location on 9/6/2012 in accordance with COGCC 900 and 1000 Series Rules.

XTO herein requests No Further Action (NFA) for REM #7162/DOC #222970.