District 1

CARD MUST BE TYPED

EFFECTIVE DATE 5-14-06

State of Kansas NOTICE OF INTENTION TO DRILL HUGOTON INFILL

CARD MUST BE SIGNED

56A - YES

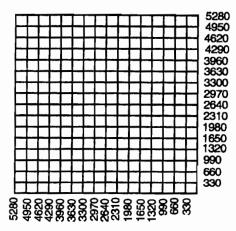
Starting Date Upon Approval	API Number 15 - 175 - 22048-0000
month day year	
OPERATOR: License # 32864 Name XTO Energy Inc. Address 210 Park Ave., Suite 2350 City/State/Zip Oklahoma City, OK 73102 Contact Person Robin S. McCarley. Phone (405) 319-3236 CONTRACTOR: License # 33375 Name Cheyenne Drilling # City/StateGarden City, KS. Well Drilled as: New Recompletion OWWO Projected Total Depth feet Formation Chase If OWWO or Recompletion: old well info as follows: Operator Well Name Comp. Date Old Total Depth I certify that well will comply with K.S.A. 55-101, et seq., plus eventual Date O4/25/00 Signature of Operator or Agent	IS SECTION X REGULAR IRREGULAR S. Rg. 34 W
	Surface Pipe Required 800 feet per Alt (1) X Approved By Put 5-9-06
This Audionization Exputs	9/95

Must be filed with K.C.C. five (5) days prior to commencing well This card void if drilling not started within six (6) months of date received by K.C.C.

RECEIVED MAY 04 2006

KCC WICHITA

A Regular Section of Land
1 Mile = 5,280 Ft.



Important procedures to follow:

- 1. Notify District office before setting surface casing.
- 2. Set surface casing by circulating cement to the top.
- 3. File completion forms ACO-1 with K.C.C. within 120 days of well spud date, following instructions on ACO-1, side 1, and including copies of wireline logs.
- 4. Notify District office 48 hours prior to old well workover or reentry.
- 5. Submit plugging report (CP-4) to K.C.C. after plugging is completed.
- 6. If an alternate 2 completion, cement in the production pipe from below any useable water to surface within 120 days of spud date.

State Corporation Commission of Kansas Conservation Division 130 S. Market Room 2078 Wichita, Kansas 67202-1212 (316) 337-6231

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CDP-1 April 2004 Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

Operator Name: XTO Energy Inc.		License Number: 32864		
Operator Address: 210 Park Ave	e., Suite 235	50 Okla	homa City, OK 73102	
Contact Person: Robin S. McCarley		Phone Number: (405) 319 - 3236		
Lease Name & Well No.: Rogers 4-18		Pit Location (QQQQ):		
Type of Pit:	Pit is:		NE NE SW SW	
Emergency Pit Burn Pit	✓ Proposed Existing		Sec18_Twp34S_R34 ☐ East ✓ West	
Settling Pit	If Existing, date constructed:		1250 Feet from North / South Line of Section	
Workover Pit Haul-Off Pit			1250 Feet from East / West Line of Section	
(If WP Supply API No. or Year Drilled)	Pit capacity:	(bbls)	SewardCour	
Is the pit located in a Sensitive Ground Water	Area? Wee T		Chloride concentration:mg/	
is the pit located in a Sensitive Ground Water	Is the pit located in a Sensitive Ground Water Area? Yes 7 No		(For Emergency Pits and Settling Pits only)	
Is the bottom below ground level?	Artificial Liner?		How is the pit lined if a plastic liner is not used?	
✓ Yes No	Yes ✓	No	Earthen	
Pit dimensions (all but working pits):1	50 Length (fe	eet)150	Width (feet) N/A: Steel Pits	
Depth from ground level to deepest point: 6(feet)				
If the pit is lined give a brief description of the liner Describe procedures for periodic maintenance and determining				
		liner integrity, i	ncluding any special monitoring.	
Earthen			MAY 0-4 2006	
			K00 14401 117	
		West fresh water 180 feet		
		Source of infor		
		measu	measured well owner electric log O	
			Prilling, Workover and Haul-Off Pits ONLY:	
Producing Formation: Type of mate		al utilized in drilling/workover: Native Soil		
Number of producing wells on lease: Number of w		Number of wor	king pits to be utilized:1	
Barrels of fluid produced daily: Abandonment		procedure: Evaporation & close		
Does the slope from the tank battery allow all spilled fluids to flow into the pit?		be closed within 365 days of spud date.		
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.				
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.				
Date Signature of Applicant or Agent				
KCC OFFICE USE ONLY				
Date Received: 5/8/4 Permit Number: Permit Date: 5/8/06 Lease Inspection: Yes X No				