SHAR-ALAN OIL COMPANY

1402 DENVER U. S. NATIONAL CENTER

DENVER 2. GOLORADO

August 20, 1964

New Mexico Oil & Gas Commission 1000 Rio Brazos Road Aztec, New Mexico

RE: #1 Northcutt

NW/4 Section 2 - 23N - 1W Rio Arriba County, New Mexico

Gentlemen:

In view of your decision to consider the Torrejon Puerco formation as a part of the Pictured Cliffs producing zone, as set out in your letter dated July 28, 1964 addressed to our office, I re-submit herewith original and four copies each of your forms C-104 and C-110 covering the above captioned well, which should complete your files on said well.

If there is anything further you need relative to this well, please advise.

Very truly yours,

SHAR-ALAN OIL COMPANY

H. F. Gumz

Manager of Lands & Explorations

HFG/so Enclosures

AMERICAN CONTRACTOR OF CONTRACTOR CONTRACTOR

DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER GAS PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe. New Mexico

(Form C-104) Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWAPLE

New Well Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

| | w die so | AR tain | 13. Qu. 1114. | Denver, Colorado August 20, 1964 (Place) (Date) |
|--------------|-----------------|---------------------|----------------------------|--|
| WE AR | E HERI | EBY R | EOUESTI | ING AN ALLOWABLE FOR A WELL KNOWN AS: |
| | | | | NORTHCUTT, Well No. 1, in. NW 1/4, NW 1/4, |
| | (Compan | y or Op | erator) | (Lease) |
| D | a Letter | , Sec. | 2 | T 23N , R IW , NMPM., So Blanco PC Pool |
| | | | | County Date Spudded 10-11-63 Date Drilling Completed 10-14-63 |
| | Please in | | | Elevation GL 7256 Total Depth 2830' PBTD |
| D | l c | В | T A | Top SEX/Gas Pay 2586' Name of Prod. Form. Pictured Cliffs |
| x | 6.2 | | | PRODUCING INTERVAL - |
| a second | | | | Perforations 2586'-2596; 2640-2664' 2616-2621 |
| E | r | G | H | Open Hole Depth Casing Shoe 2798' Tubing 2621' |
| | | - | | OIL WELL TEST - |
| L | K | J | I | Choke Natural Prod. Test: bbls.oil, bbls water in hrs, min. Size |
| | 1 | | | Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of |
| M | N | 0 | P | Choke load oil used): bbls.oil, bbls water in hrs, min. Size |
| | <u> </u> | | | GAS WELL TEST - |
| 823 | FNL & | 1015 | FWL | Natural Prod. Test: MCF/Day; Hours flowed Choke Size |
| Lubing | (Foot Casing | | nting Reco | method of Testing (pitot, back pressure, etc.): |
| Siz | re | Feet | Sax | Test After Activer Fracture Treatment: 1892 MCF/Day; Hours flowed 3 hr |
| | | | | Choke Size 3/4" Method of Testing: Back Pressure |
| 8 5 | /8'' 1 | 01' | 60 | |
| 4 1 | /2" 21 | 3 25' | 150 | Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 37.800 gallons water and 35.000# sand |
| 2 3 | /8" 2 | 621' | | Casing 676 Tubing Date first new Press. oil run to tanks |
| 123 | , , | | | |
| | - | | | Gas Transporter KNAW El Paso Natural Gas Company |
| | | _ 3 324 | | bove frac, on 10-28-63, used 500 gal. mud acid thru perfe 2616-2 |
| Remark | ks:In. | ilddr. | ion io a | 30,000# sand and 33,000 gal. water. On 11-8-63 Acid treated |
| 10- | 30-03 | Irac | +P 320 a | rel mud acid |
| | | | | gal. mud acid |
| I | hereby co | ertify th IG 2.7 | na, the info 1964 | formation given above is true and complete to the best of my knowledge. Shar-Alan Oil Company (Company) |
| Approv | Cu | | - 4444 - 4 · · · · · · · · | (Company or Operator) |
| | OIL C | ONSE | RVATION | N COMMISSION By: H. F. Gurnz (Signature) |
| Bv: | Origin | al Sig | ined Em | nery C. Arnold Mgr. of Lands & Explorations |
| , | Supervi | sor Dis | £ # 3 | Send Communications regarding well to: Name Shar-Alan Oil Company |
| | | | | 1402 Denver U. S. National Center |
| | | | | Address Denver Colorado 80202 |

| NO. OF COPIES REC | EIVED | 11 | |
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| SANTA FE | | 1 | |
| FILE | _ | | - |
| U.S.G.S. | | | |
| LAND OFFICE | | | l |
| TRANSPORTER | OIL | | |
| THANG, ON EN | GAS | 1 | |
| OPERATOR | | 1 | |

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110

| ľ | FILE / | _ | AND | Effective 1-1-65 |
|------|--|--|--|--|
| ļ | U.S.G.S. | AUTHORIZATION TO TRA | NSPORT OIL AND NATURAL (| GAS |
| | LAND OFFICE | | | |
| | TRANSPORTER OIL | | | |
| | OPERATOR / | | | |
| | PRORATION OFFICE | | | |
| •• | Operator | | | |
| | DYNA RAY OIL & G | AS CO., INC. | | |
| | | Ave., Denwer, Colo | rado 80222 | |
| | Reason(s) for filing (Check proper box) | | Other (Please explain) | |
| | New Well | Change in Transporter of: | | |
| | Recompletion Change in Ownership | Oil Dry Gas Casinghead Gas Conden | ─ ── | |
| İ | | | | |
| | If change of ownership give name and address of previous owner | ar-Alan Oil Co., 410 | 1 F La. Ave., Denve | r, Colorado 80232 |
| | | | | |
| II. | DESCRIPTION OF WELL AND I | Well No. Pool Name, Including Fo | ormation Kind of Leas | Lease No. |
| | Northcutt | 1 So Blanco Pc | State, Federa | al or Fee Fee |
| | Location | | 3015 | |
| | Unit Letter D ;823 | Feet From The NOTTN Lin | e and 1015 Feet From | The West |
| | Line of Section 2 Tow | nship 23N Range 1 | W , NMPM, Rio A | rriba County |
| | | | | |
| III. | DESIGNATION OF TRANSPORT | | S Address (Give address to which appro | aved conv of this form is to be sent) |
| | Name of Authorized Transporter of Oil | of Condensate | Address (othe undress to mitte appre | bed sopy of since form to to on com, |
| | 'Name of Authorized Transporter of Cas | inghead Gas or Dry Gas | Address (Give address to which appro | oved copy of this form is to be sent) |
| | El Paso Natural | | | , New Mexico 87401 |
| | If well produces oil or liquids, | Unit Sec. Twp. Rge. | , , | nen |
| | give location of tanks. | | Yes | |
| | If this production is commingled wit COMPLETION DATA | h that from any other lease or pool, | give commingling order number: | |
| ••• | Designate Type of Completion | Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Restv. Diff. Restv. |
| | | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| | Date Spudded | Date Compi. Reddy to Floa. | Total Deptin | 1.5.1.5. |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| | | | | Depth Casing Shoe |
| | Perforations | | | Depth Custing blice |
| | | | | |
| | | TUBING, CASING, AND | CEMENTING RECORD | |
| | HOLE SIZE | TUBING, CASING, AND | DEPTH SET | SACKS CEMENT |
| | HOLE SIZE | T. | | SACKS CEMENT |
| | HOLE SIZE | T. | | SACKS CEMENT |
| | HOLE SIZE | T. | | SACKS CEMENT |
| v. | HOLE SIZE TEST DATA AND REQUEST FO | CASING & TUBING SIZE OR ALLOWABLE (Test must be a | DEPTH SET | SACKS CEMENT l and must be equal to or exceed top allow- |
| v. | TEST DATA AND REQUEST FOOL WELL | CASING & TUBING SIZE OR ALLOWABLE (Test must be a | DEPTH SET | l and must be equal to or exceed top allow- |
| V. | TEST DATA AND REQUEST FO | CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de | DEPTH SET fter recovery of total volume of load oil pth or be for full 24 hours) | l and must be equal to or exceed top allow- |
| V. | TEST DATA AND REQUEST FOOL WELL | CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de | DEPTH SET fter recovery of total volume of load oil pth or be for full 24 hours) | l and must be equal to or exceed top allow- |
| V. | TEST DATA AND REQUEST FOOLL WELL Date First New Oil Run To Tanks Length of Test | CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test: Tubing Pressure | fter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas i | l and must be equal to or exceed top allow- ift, etc.) |
| V. | TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks | CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de | pepth Set fter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas l Casing Pressure | l and must be equal to or exceed top allow- lift, etc.) Choke Size |
| v. | TEST DATA AND REQUEST FOOLL WELL Date First New Oil Run To Tanks Length of Test | CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test: Tubing Pressure | pepth Set fter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas l Casing Pressure | I and must be equal to or exceed top allow- ift, etc.) Choke Size |
| V. | TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL | CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test. Tubing Pressure Oil-Bbls. | fter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas left) Casing Pressure Water-Bbls. | Choke Size Gas GF Gas 4 1468 |
| v. | TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test | CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test: Tubing Pressure | pepth Set fter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas l Casing Pressure | Choke Size Gas GF Gas 4 1468 |
| v. | TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL | CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test. Tubing Pressure Oil-Bbls. | fter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas left) Casing Pressure Water-Bbls. | I and must be equal to or exceed top allow- ift, etc.) Choke Size Gas 4 1466 |
| V. | TEST DATA AND REQUEST FOOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D | CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test Tubing Pressure Oil-Bbls. | fter recovery of total volume of load of pth or be for full 24 hours) Producing Method (Flow, pump, gas if Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) | Choke Size Gravity of Condensate Choke Size Gravity of Condensate Choke Size |
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| Operator TRA | NS D | ELT | Άζ |
| 122 | 0 LEY | | |
| | VER, | | |
| Reason(s) for filing | (Check) | roper | box) |
| New Well | | | |

| | SANTA FE | REQUEST I | FOR ALLOWABLE AND NSPORT OIL AND NATURAL (| Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 |
|------|--|--|--|--|
| | I RANSPORTER OIL GAS / | | | |
| 1. | PROBATION OFFICE | | | |
| | TRANS DELTA | OIL & GAS CO., INC. | | |
| | Address 1330 LEYDEN S DENVER, COLO | TREET SUITE 131 | | |
| | Reason(s) for filing (Check proper box | | ———Corporate Na | ame Change from |
| | New Well | Change in Transporter of: | | & Gas Co., Inc. to |
| | Recompletion | Oil Dry Gas | | |
| | Change in Ownership | Casinghead Gas Conden | Trans Delta O | il & Gas Co., Inc. |
| | If change of ownership give name and address of previous owner | | | |
| XI. | DESCRIPTION OF WELL AND | LEASE Well No. Pool Name, Including Fo | ormation Kind or Leas | e Lease No. |
| | NORTHCUTT | 1 SO BLANCO PC | la | d or Fee |
| | Location | × 823 | 1540 1015 | M |
| | Unit Letter D ; | Feet From The N Line | e and Feet From | TheW |
| | Line of Section 2 To | wnship 23N Range 1W | , NMPM, RIO A | RRIBA County |
| *** | DESIGNATION OF TRANSPOR | TER OF OIL AND NATURAL GA | S | |
| 111. | Name of Authorized Transporter of Oil | or Condensate | Address (Give address to which appro | ved copy of this form is to be sent) |
| | Name of Authorized Transporter of Ca | singhead Gas or Dry Gas X | Address (Give address to which appro | ved copy of this form is to be sent) |
| | EL PASO NATURAL GA | | FL PASO TX | |
| | If well produces oil or liquids, | Unit Sec. Twp. Age. | Is gas actually connected? Wh | en |
| | give location of tanks. | 1 | 1965 | |
| īV | If this production is commingled wi | th that from any other lease or pool, | give commingling order number: | |
| | Designate Type of Completi | on - (X) | New Well Workover Deepen | Plug Back Same Resty. Diff. Resty. |
| | Date-Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
| | | | m 001/0 - D | Tuling Depth |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | rating bepon |
| | Perforations | | 4 | Depth Casing Shoe |
| | | TUDING CASING AND | CEMENTING RECORD | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | | |
| | | | | |
| | | | | |
| V. | TEST DATA AND REQUEST F | OR ALLOWABLE (Test must be a able for this de | pth or be for full 24 hours) | and must be equal to or exceed top allow- |
| | OIL WELL Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas l. | ift, etc.) |
| | | Tubing Pressure | Casing Pressure | Choke Size |
| | Length of Test | | | 1 / 39 |
| | Actual Prod. During Test | OII-Bbls. | Water - Bbls. | Gae MCF |
| | | | | 011 |
| | GAS WELL | | | Gravity of Condensate |
| | Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| | Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| | | | | |
| VI. | CERTIFICATE OF COMPLIAN | ICE . | 11 | ATION COMMISSION |
| | I haveby cartify that the rules and | regulations of the Oil Conservation | AI NO LO | 2 9 1973 |
| | | with and that the information given a best of my knowledge and belief. | BYOriginal Signed | i by Emery C. Ara |
| | BAUTA IS THE SHE COMPLETE TO M | | | ISGA DIST. #3 |
| | 1 h. (| , | | compliance with RULE 1104. |
| | 1 Mast LAN | | If this is a request for allo | wable for a newly drilled or deepened |
| | CHIEF ACCT | nature) | tests taken on the well in acco | ordance with MULE 111. |
| | | itle) | able on new and recompleted w | ust be filled out completely for allow- |
| | DEC 20 1972 | | | II. III. and VI for changes of owner, rter, or other such change of condition. |
| | (L | (ate) | West mamo or manager, or manager | |

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OIL CONSERVATION DIVISION P. O. DOX 2008 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

| OPERATOR | AUTHORIZATION TO TRANSF | YO PORT OIL AND NATURAL (| GAS | |
|--|--|---|--|--|
| Operator Petro Lewis Corpo | oration | | | |
| P. O. Box 937, Le | evelland, Texas 79336 | | | |
| Reason(s) for filing (Check proper box | | Other (Please explo | in) | |
| New Well | Change in Transporter of: Off Dry Go | · | | |
| Ascomplation Change in Ownership X | Castnghead Gan Conder | racte . | | and the state of t |
| Change of ownership give name and address of previous owner | Trans Delta Oil and Gas | Co., Inc., 6300 Ric | | rth, Tex. 76116 |
| DESCRIPTION OF WELL AND | LEASE. Well No. Pool Name, Including F | ••••• | of Leasa | Leas No. |
| Northcutt | 1 Blanco PC S | outh State | , Foderal or Foo Fee | |
| Unit Letter D 823 | Feet From The North Lin | a and 1015 Fee | | <u>.</u> |
| Line of Section 2 To | whiship 23 N Ronge | 1 W , NMPM, | Rio Arriba | County |
| DESIGNATION OF TRANSPOR | TER OF OIL AND MATURAL GA | S Address (Cive address to whi | ch approved copy of this form is | to be sent) |
| Home of Authorities Transporter of Co | ssinghead Gas Or Dry Gas (| Address (Give address to whi | ch approved copy of this form is | so be sent) |
| El Paso Natural | Gas Co. | P. O. Box 1492, E | 1 Paso, Texas 79978 | |
| If well produces off or liquids, give location of tanks. | | Yes | Ì | |
| If this production is commingled w | ith that from any other lease or pool, | give commingling order num | | |
| COMPLETION DATA Designate Type of Completi | On Well Gas Well | Naw Well Workover De | epen Plug Book Same Ba | sty. 'Diff. Resty |
| Date Soudded | Data Compt. Ready to Prod. | Total Dopth | P.B.T.D. | |
| | "ame of Producting Formation | Top Oil/Cas Pay | Tubing Dopth | alliani yang serin gamaj da serin manggapapa dinagan meneru |
| Elevations (DF, RKS, RF, GR, 110.) | | | Dapth Cestor Shor | |
| Perlorations | | | ospin ocomy onos | فليقا والمنافعية والمنافعية والمنافعية والمنافعية والمنافعية والمنافعية والمنافعية والمنافعة والمنافعة والمنافعة |
| | | D CEMENTING RECORD | SACKS CE | MEST |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | |
| | | | | |
| | | | | |
| TEST DATA AND REQUEST I | FOR ALLOWABLE (Test must be a | after recovery of total volume of epth or be for full 24 hours) | load oil and must he equal to or | axe red top allor |
| OIL WELL. Date First New Oil Run To Tonks | Date of Test | Producing Method (Flow, pur | ip, gas lift, ste.) | ×4. |
| Length of Tool | Tubing Prosours | Casing Pressure | Choxo SI . por | |
| | | Vata: - Bbls. | Gau+MCF | |
| Actual Prod. During Test | O:1-Bbls. | | - $ -$ | 000 |
| and the state of t | | | | Land L |
| GAS WELL Actual Fred. Lant-MCF/D | Longth of Tost | Bbla. Condensote/MMCF | Gravity Condinia | 10 |
| Leating Living (piros, tack pr.) | Tubing Pressure (Shut-in) | Cosing Pressure (Shut-10) | Choke Sitt | 201425 |
| CERTIFICATE OF COMPLIA: | YCE | OIL CONS | SERVATION DIVISION | general stand was to discovery |
| I hereby certify that the rules and | regulations of the Oli Conservation | APPROVED | | ., 10 |
| Division have been complied will above is true and complete to the | th and that the information given he best of my knowledge and belief, | | JPFRVISOR RISUDIOT # 3 | |
| | | | JPERVISOR DISTRICT # 3 | |
| George | Jamos | If this is a request | filed in compliance with AU for allowable for a newly dr accompanied by a tobulation | inequaling balls Malveb alt to |
| District Adminis | strator | tests taken on the well | form must be filled out com | • • • • |
| • | Tale) | Ablo on new and recom | plated watto. | sawa ta anna |
| December 1, 1980 | Dute) | 11 | transporter or other such the | |
| | | H notableten zagirat | | |

MISSION Parm C-104 TAPE REQUEST FOR ALLOWABLE Supersedes Old C-104 and (Effective 1-1-65 AND 0.1 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS DOFFICE DIL IRANSPORTER **OPERATOR** PROBATION OFFICE Oper ster Graham Rovalty. Ltd 1675 Larimer St., Reesen(s) for filing (Check proper box) Suite 400, Denver, CO 80202 Other (Please explain) New Well Recompletion Oil Dry Gos Change in Ownership XX05/01/86 Casinahead Gas Condensate If change of ownership give name and address of previous owner ____ Petro-Lewis Corp., P.O. Box 90500, Houston, TX 77290 II. DESCRIPTION OF WELL AND LEASE | Well No. | Pool Name, Including Formation Lease No 1 FEE Northcutt Blanco Pictured Cliffs, State, Federal or Fee Location 823 Feet From The___ 1015 North Line and Feel From The West Unit Letter_ Township 23N Range 1W .NMPM, Rio Arriba Line of Section County II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | Name of Authorized Transporter of Oil | or Condensate | Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Name of Authorized Transporter of Casinghead Gas or Dry Gas ! Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, TX 79978 El Paso Natural Gas Company Twp. P.ge. is say actually connected? Unit If well produces oil or liquids, give location of tanks. YES If this production is commingled with that from any other lease or pool, give commingling order numbers COMPLETION DATA Workover Plug Back | Same Res'v. Diff. Res Gas Well TNew Well Oil Well Deepen Designate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth P.B.T.D. Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Top Oll/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT (Test must be after recovery of total volume of load oil and must be equal to or exceed top alle able for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tonks Date of Test Tubing Pressure Casing Pressure Choke Size Length of Test Que - MCF Actual Prod. During Test Water - Bblo. **GAS WELI** Actual Prod. Test-MCF/D Bbls. Condensate/AMCF Gravity of Condensate Length of Test Testing Method (pitol, back pr.) Tubing Pressure (Shut-in) Cosing Pressure (Shut-in) Choke \$130 VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPROVED. I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief. BY_ SUPERVISOR DISTAGE 3 TITLE. This form is to be filed in compliance with RULE 1104.

(Signature)

(Tule)

(Date)

Super.

Prod. Acctq.

May 12, 1986

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviational taken on the well is accordance with RULE 111.

All sections of this form must be filled out completely for alloable on new and recompleted wells.

Fill out only Sections 1, 11, 111, and VI for changes of owns well name or number, or transportes or other such change of condition

Submit 5 Copies Appropriate Dialect Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Furm C-104 Revised 1-1 #9 See Instruction at Bottom of P

DISTRICT II
P.O. Drawer DD, Arlena, NM \$1210

OIL CONSERVATION DIVISION P.O. Box 2088

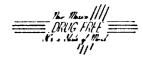
| terbier fil | Sau | nta Fe, New Mex | uco 87504-2088 | | <. Fd 1 | No. 12 | |
|---|-------------------------|---|--|---|-----------------------------|-------------------|-------------|
| ISTRICT III XVI Rio Brazos Rd., Assec, NM 87410 | REQUEST FO | OR ALLOWABL | E AND AUTHORI AND NATURAL G | ZATION AS | | age to the degree | |
| | IOTHA | NSPORT OIL | AND NATOTAL CO | Wally | Pl Na | | ········· |
| Kerns Oil and Gas | Inc. | | | | | | |
| 2340 N. Niagara L | ane, Suite | #2, Plymout | h, MN 55447 | | | | |
| eason(s) for Filing (Checa proper box) | | | Other (Please expl | aun) | | | |
| ew Wull | | Transporter of: | | | | | : |
| hange is Operator X12/1/89 | Casingheed Cas | | | | | | |
| | | | Larimer St., | Suite # | 4400, D | enver, | CO 8020 |
| . DESCRIPTION OF WELL | AND LEASE | | · · · · · · · · · · · · · · · · · · · | | (1 Fa | - 1. | se No. |
| Northcutt | Well No. | Pool Name, Includes Blanco Pi | ctured Cliffs | S SIME, I | Lesse Fel | | |
| Location D | 82.8 | 1963 Feet From The N | lorth Line and | 1015 | at From The . | West | Los |
| Unit Letter | _ : | 1W | | io Arrib | | | County |
| | F | | | | | | |
| II. DESIGNATION OF TRAN Nume of Authonized Transporter of Oil NA | SPORTER OF C | IL AND NATUS | Address (Give eddress to e | hich approved | copy of this fo | orm 12 to be 14 | N) |
| Name of Authorized Treasporter of Case | | or Dry Cas | Address (Give address to P. O. Box 149 | hich approved | copy of that for | 79978 | ~) |
| El Paso Natural (| luat Sec. | Tora Rgs | is gas actually connected? | Whea | | , , , , , , | |
| uve location of tanks. NA | <u> </u> | <u>i i i i i i i i i i i i i i i i i i i </u> | YES | | | | |
| f this production is commissed with that V. COMPLETION DATA | | | | Despes | Mus Back | Same Res v | Dill Reav |
| Designate Type of Completion | - (X) Oil We | II Ges Well | New Well Workover |) Desper | 1 | | |
| Date Specified | Date Compt. Rendy | to Prod. | Total Depth | | P.B.T D. | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing | Formulade | Top Oil/Gas Pay | | Tubing Dep | ×b | |
| Perforations | | | <u> </u> | ,,,,,, | Depth Cau | ag Shoe | |
| | TUBINO | , CASING AND | CEMENTING RECO | RD | <u> </u> | | |
| HOLE SIZE | CASING & | TUBING SIZE | DEPTH SE | 7 | | SACKS CEM | ENT |
| | | | | | | | |
| | | | | | | | |
| V. TEST DATA AND REQUE | ST FOR ALLOV | VABLE | | | | | |
| OIL WELL (Test must be after Due First New Oil Rue To Test | recovery of load value | ne of load oil and must | be equal to or exceed top a | slovebie for th more, see til. | is depth or be etc.) | for full 24 ho | ws.) |
| DIM PAR MAN ON KIM 10 1MM | Design 102 | | | | | | |
| Length of Test | Tubing Pressure | | Casing Pressure | | Choke Su | • | |
| Actual Prod. During Test | Oil - Bhis | | Water - Bhis. | *************************************** | Gas- MCI | | |
| GAS WELL | | | | | | | |
| Actual Prod. Test - MCF/D | Leagth of Tes | | Bbis Condensin/MMC | | Grevity of | Condenses | |
| Testing Melbod (puer, back pr.) | Tubing Pressure (S | Sui-a) | Coming Pressure (Shut-in | , | Choke Si | LA | |
| VL OPERATOR CERTIFI | | | OIL CO | ONSER\ | /ATION | I DIVISI | ON |
| I hereby certify that the rules and re- Division have been complied with a | nd that the information | gives above | | | | | |
| is true and complete to the best of st | ry thowadge and belief | ī. | Date Appro | ved | DEC | 19 1999 | |
| Storie X | eus | | p., | | | Λ | |
| Shellby R Kern | s - Presider | nt | Ву | 3. | , , , | Chang | / |
| December 7, 19 | | 175-0893 | Title | SHE | ERVISO | A DISTR | ICT 43 |
| Date December 7, 13 | | Telephone No. | 11 | | | | |

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.



STATE OF NEW MEXICO



ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION AZTEC DISTRICT OFFICE

BRUCE KING GOVERNOR ANTTA LOCKWOOD CABINET SECRETARY

1000 RIO BRAZOS ROAD AZTEC, NEW MEXICO 87410 (505) 334-6178

August 24, 1992

Kerns Oil and Gas, Inc. 2600 N. Fernbrook Lane, Suite 138 Plymouth, MN 55447

RE: Temporarily Abandoned Wells

To Whom It May Concern:

Thank you for responding to Memorandum (3-91-10) dated December 27, 1991, however, you failed to submit the plans to bring the attached list of wells into compliance that were to be in this office by June 30, 1992. These wells are still inactive and require P&A or TA approval under Rules 201, 202 and 203. Your failure to respond will result in violation of Rule 201. If you do not respond by October 1, 1992, we may assess fines or take other appropriate measures.

Sincerely,

Diama K. Sairhurst

Dianna K. Fairhurst Deputy Oil & Gas Inspector

XC: TA File

DKF File Well File

Subms 5 Copes
Appropriate Pranct Office
DISTRICT!
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Astesia, NM \$8210

State of New Textoo Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brisos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| | TO: | TRANSF | PORT OIL | AND NA | TURAL G | | | | |
|--|---|--------------------------|--------------|---------------|-----------------|---------------|---------------------------|--|----------------|
| Operator EOG (New I | Mexico) In | с. | | | | 1 | api no 1390519 | 3 | |
| Address 621 Seven | teenth St. | , Sui | te 180 | O, Den | ver, CO | 8029 | 3 | | |
| Reason(s) for Filing (Check proper bo | z) | | | | res (Please exp | | | | |
| New Well Recompletion | Chua Chi | ge in Trans | | Cha | nge of | operat | or eff | ective | 8/1/93 |
| Change is Operator | Caunghead Gas | _ ` | 48594 | | | | | | |
| If change of operator give name ke | rns Oil & Ga | s. Inc | . 2600 | N. Ferni | prook Ln | , #138, | Plymout | h, MN | 55447 |
| II. DESCRIPTION OF WEI | L AND LEASE | | | | | | | | |
| Lease Name Northcutt | Well 1 | | | P.C. S | outh | | of Lease Federal on Fe | | esse No. A |
| Location | <u>-</u> | | | | | | | | ··· |
| Unit Letter | : 823 | Feet ! | From The | <u>N Lie</u> | 10 | 15 F | set From The | W | Line |
| Section 2 Town | aship 23N | Rang | L | 1 W N | mpm, R | io Arri | oa | | County |
| III. DESIGNATION OF TR | | FOIL A | ND NATU | | | | | | |
| Name of Authorized Transporter of O N/A | or Co | redectate | | Address (Gi | | hick approved | copy of this | form is to be s | (AI) |
| Name of Authorized Transporter of C | | or Dr | y Gas 👗 | Address (Gi | e address to w | | | form u io be s | |
| El Paso Natural Ga | | 1=- | | | | | | 79978 | |
| If well produces oil or liquids, give location of tanks. N/A | Uaut Sec. | Twp | l Rgs. | II GAS SCRIPT | y connected? | What | | | |
| If this production is commungled with IV. COMPLETION DATA | has from any other less | s or pool, g | As committee | uag order sum | ber: | | | | |
| | | Well | Gas Well | New Well | Workover | Deepes | Plug Back | Same Res'v | Diff Resiv |
| Designate Type of Complete | | i | | Total Page | <u> </u> | i | | <u>i </u> | <u> </u> |
| Date Spudded | Dute Compt. Res | sy io Pivil | | Total Depth | | | P.B.T.D. | | |
| Elevauoes (DF, RKB, RT, GR, etc.) | Name of Produce | eg Formauo | • | Top Oil/Cas | Pey | | Tubing Dep | NA. | |
| Perforations | | | | 1 | | | Dopus Case | y Shoe | |
| | TUBD | NG, CAS | ING AND | CEMENTI | NG RECOR | മ | | | |
| HOLE SIZE | | A TUBING | | | DEPTH SET | | | SACKS CEM | ENT |
| | | | | 1 | | | | | |
| | | | | | | | | | |
| V. TEST DATA AND REQU | EST FOR ALL |)WABLE | | | | | | | |
| OIL WELL (Test meet be of | er recovery of lotal vol | | | | | | | for full 24 hou | (I) |
| Date First New Oil Rus To Tank | Date of Test | | | Producing M | ethod (Flow, p | unp, gas ijā, | ") [D) | EGE | IVE |
| Leagth of Test | Tubing Processes | | | Cause Press | 10 | | Cooks | CED- | £ 40.00 |
| Actual Prod. During Test | Oil - Bhis. | | | Water - Bhis | | | Gas- MCF | SEP1 | 1 199 3 |
| | | | • | | | | | IL COL | |
| GAS WELL Actual Prod. Test - MCF/D | Leadin of Tox | | | I Bala Cons | | | | DIST | |
| | and the second | | | Bbis. Conde | | | Cravity of | And the second | |
| Tesung Method (pilet, back pr.) | Tubiag Presaus | (Suc - a) | - | Casing Press | uso (Shus-ia) | | Choke Size | | |
| VL OPERATOR CERTIF I hereby certify that the rules and re Division have been complied with a is true and complete to the best of a | guistions of the Oil Co and that the information | MARFYALICE DEVER ABOV | - | 11 . | | | ATION EP 14 | DIVISIC 1993 |)N |
| two 4 | lyn: | · | | By_ | Approve | d |). d | Tony | |
| Laura Zinn V/P. | | Tule | | Title | | SUPERV | ISOR DI | STRICT | <i>(</i> ? |
| SEP 0 9 (003 | (303) 293 <u>-99</u> | 99 Telephone I | | | | | | | |

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Submit 3 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

חוקדפירד ו

OIL CONSERVATION DIVISION

Revised 1-1-89

| P.O. Box 1980, Hobbs, NM 88240 | | A DIAISION | WELL API NO. | |
|--|----------------------------------|------------------------------|--|-----------------------|
| | | 7504 2000 | | |
| P.O. Drawer DD, Artesia, NM 88210 | re, New Mexico 8 | 7504-2088 | 5. Indicate Type of Lease | FFF V |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | | 6. State Oil & Gas Lease No. N/A | 122 3 |
| | | | | |
| DIFFERENT RESERVOIR. USE "API | PLICATION FOR PERM | | | |
| I. Type of Well: OIL GAS WELL WELL X | OTHER | | Northcutt | |
| 2. Name of Operator EOG (New Mexico) Inc. | | | 8. Well No. #1 | |
| 3. Address of Operator | | | 9. Pool name or Wildcat | |
| STATE FE STATE FE STATE FE STATE FE STATE STATE FE STATE FE STATE STATE FE STATE S | | | fs | |
| P.O. Box 2088 Santa Fe, New Mexico 87504-2088 Solidicate Type of Lease STATE FEE STATE STATE FEE STATE STATE STATE FEE STATE STATE STATE STATE | | | | |
| 2 Section 23N Township | 1W Range | . N | мрм Rio Arriba | Causan |
| | | | | |
| 11. Check Appropriate B | ox to Indicate Na | ture of Notice, Re | port, or Other Data | |
| NOTICE OF INTENTION TO |): | SUBS | EQUENT REPORT OF | |
| PERFORM REMEDIAL WORK PLUG AND | ABANDON _ F | REMEDIAL WORK | ALTERING CASING | |
| TEMPORARILY ABANDON CHANGE P | LANS C | COMMENCE DRILLING | OPNS. DPUG AND ABANDO | NMENT |
| PULL OR ALTER CASING | c | CASING TEST AND CEN | | |
| OTHER: MIT Test | 🗆 c | THER: | | |
| work) SEE RULE 1103. | all pertinent details, and gi | ive pertinent dates, includi | ng estimated date of starting any proposed | |
| 2) Set 4 anchors 3) MIRU PU 4) POH 2-3/8" tbg. LD on flo 5) Notify NMOCC to witness | | packer | d | 5 |
| 7) Set packer 8) Press test 4-1/2" x 2-3/8" 9) POH 2-3/8" tbg & packer. 10) NU valve on casing | annulus to NM LD on float | 10CC specs | e gode Di | |
| 11) SI well. IT needs repair, | will repair i | acer. | والمتعقق فيترفض فيترفض والمتعارض وال | Language Constitution |
| Thereby certify that the information shows is true and complete to the le | and of my impossioning and half- | | | |
| | TITLE _ | | ng Tech DATE 5/6/9 | 4 |
| CONNI SMITH TYPE OR PRINT NAME | | | TELEPHONE NO. | |
| (Thus apace for State Use) | | | | |
| APPROVED BY ORIGINAL SIGNED BY ERNIE BUSCH | H mue J | DEPUTY OIL & GAS IN | STENTON DIST. ST. DATE | 3 -94 |
| CONDITIONS OF APPROVAL, IF ANY: | | | | |

| Submit 3 Copies to Appropriate District Office | State of New M Energy, Minerals and Natural R | 1 | | Form C-103 Revised 1-1-89 |
|--|--|---|--|------------------------------|
| DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II | OIL CONSERVATION P.O. Box 20 | 88 | WELL API NO. 30-039-05193 | |
| P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 | Santa Fe, New Mexico | 87504-2088 | 5. Indicate Type of Lease S 6. State Oil & Gas Lease | TATE FEE X |
| (DO NOT USE THIS FORM FOR PRO DIFFERENT RESER | CES AND REPORTS ON WE PPOSALS TO DRILL OR TO DEEPEN RVOIR. USE "APPLICATION FOR PE (101) FOR SUCH PROPOSALS.) | OR PLUG BACK TO A | N/A 7. Lease Name or Unit Ag | reement Name |
| I. Type of Well: OIL GAS WELL GAS WELL X | OTHER | | Northcutt | |
| 2. Name of Operator EOG (New Mexico) Inc. | | | 8. Well No. #1 | |
| 3. Address of Operator 621 17th St., Suite 1 4. Well Location | 800, Denver, CO. 802 | 293 | 9. Pool name or Wildcat Blanco Picture | ed Cliffs |
| Unit Letter D : 82 | 23. Feet From The FNL | Line and101 | Feet From The | FWL Line |
| 2 Section 23N | Township 1W Ra 10. Elevation (Show whether | | NMPM Rio Arriba | County |
| 11. Check A NOTICE OF INT | Appropriate Box to Indicate In ENTION TO: | 1 | port, or Other Data SEQUENT REPOR | RT OF: |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | ALTERI | NG CASING |
| TEMPORARILY ABANDON D'ULL OR ALTER CASING | CHANGE PLANS | COMMENCE DRILLING | | ND ABANDONMENT |
| OTHER: | | OTHER: Puc 7 | | |
| 12. Describe Proposed or Completed Operation work) SEE RULE 1103. | 008 (Clearly state all pertinent details, an | d give pertinent dates, includi | ing estimated date of starting | any proposed |
| POH 82 jts = 2583' of | 2-3/8" tbg. | | gradients construints. | * X. (A |
| Well TA'd. | | | | |
| BIP E | 2605 | · • . | NOV 2 | 1 1994 |
| | | | | S. DIV. |
| | | | | |
| I hereby certify that the information above is true a | | odić. | a Toch | |

| SKINATURE Conni Smith | ge and beliefSr. Engineering Tech. | DATE |
|-----------------------|------------------------------------|---------------------------|
| TYPE OR PRINT NAME | | TELEPHONE NO. 303-293-999 |

(This space for State Use)

DEPUTY OIL & GAS INSPECTOR, DIST. #3 NOV 2 1 1994

CONDITIONS OF APPROVAL, IF ANY:

| DISTRICT II DISTRICT II P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III | Energy, Minerals and Natural F OIL CONSERVATION P.O. Box 20 | • | Revised 1- | -1-89 |
|--|---|--------------------------------------|----------------------------------|---|
| P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 | | ON DIVICION | / | |
| P.O. Drawer DD, Artesia, NM 88210 | F U DOX 20 | | WELL API NO. | |
| | Santa Fe, New Mexico | | 30-039-05193 | |
| | Santa 1 e, 1 vew 1 viewes | 07504-2000 | 5. Indicate Type of Lease STATE | FEE X |
| 000 Rio Brazos Rd., Aztec, NM 87410 | | | 6. State Oil & Gas Lease No. N/A | |
| SUNDRY NOTI | CES AND REPORTS ON WE | LLS | | |
| DIFFERENT RESER | TUSE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Of Well: GAS WELL X OTHER Northcutt 8. Well No. #1 9. Pool name or Wildcat Blanco Picture Ocation Init Letter D: 823 Feet From The FNL Line and 1015 Feet From The ection 23N Township 1W Range NMPM Rio Arri Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPO | 7. Lease Name or Unit Agreement Name | | |
| Type of Well: OIL GAS WELL WELL X | OTHER | | Northcutt | |
| Name of Operator EOG (New Mexico) In | с. | | | |
| Address of Operator | 1000 D 00 | 0000 | 1 | |
| Well Location | 1800, Denver, CO. | 80293 | Blanco Pictured Cliffs | · |
| Unit Letter D: 82 | 3 Feet From The FNL | Line and1015 | Feet From The FWL | Line |
| 2 Section 23N | 10.1122 | | _{NMPM} Rio Arriba | County |
| | 10. Elevation (Show whether | DF, RKB, RT, GR, etc.) | | |
| Check A | Appropriate Box to Indicate I | | | |
| NOTICE OF INT | ENTION TO: | SUB | SEQUENT REPORT OF: | |
| RFORM REMEDIAL WORK | PLUG AND ABANDON X | REMEDIAL WORK | ALTERING CASING | |
| MPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING | OPNS. PLUG AND ABANDON | MENT |
| LL OR ALTER CASING | | CASING TEST AND CE | MENT JOB | |
| HER: | | OTHER: | | |
| 1) Calc top cmt 20 2) MIRU PU 3 Run junk basket 4) Set WL CIBP @ 2 4 5) Dump 2 sx cmt o 6) RIH 2-3/8" tbg. 7) Spot 10 sx cmt 8) Cut off 8-5/8" | 013'. 7-7/8" hole size | e. 1 WL. 9 110'. GL. | DEG APR 2 6 1995 | 3 ==================================== |
| | | | L | |
| nereby certify that the information above is true a | and complete to the best of my knowledge and b | edia. | | |
| Commi, Smith, | m. | s Sr. Enginee | ring Tech DATE <u>4/24/9</u> 5 | - |
| ONATURE Conni Amith Conni Smith | | | , | |
| Conni Smith | | | TELEPHONE NO (303) | 293-999 |
| TPE OR PRINT NAME | olissonm | E SEMILA CO E 122 (A | DATE DATE PERSON | |

Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

| District Office | | 11-0) | | |
|--|---|--|--|--|
| DISTRICTI P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATIO | | WELL API NO. | | |
| DISTRICT II P.O. Drawer DD, Artesia, NM 88210 P.O. Box 2088 Santa Fe, New Mexico 87504-2088 | | 30-039-05193 | | |
| | | 5. Indicate Type of Lease | | |
| DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 | | STATE FEE X 6. State Oil & Gas Lease No. N/S | | |
| SUNDRY NOTICES AND REPORTS ON WE | | | | |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPER DIFFERENT RESERVOIR. USE "APPLICATION FOR PE (FORM C-101) FOR SUCH PROPOSALS.) | 7. Lease Name or Unit Agreement Name | | | |
| 1. Type of Well: OIL GAS WELL X OTHER | Northcutt | | | |
| 2. Name of Operator EOG (New Mexico) Inc. | | 8. Well No. #1 | | |
| 3. Address of Operator | 9. Pool name or Wildcat | | | |
| 621 17th Street, Suite 1800, Denver, 80293 | South Blanco Pictured Cliffs | | | |
| Unit Letter D: 823 Feet From The FNL | Line and10 | 015 Feet From The FWL Line | | |
| | ange 1W | NMPM Rio Arriba County | | |
| 10. Elevation (Show whether | DF, RKB, RT, GR, etc.) | | | |
| 11. Check Appropriate Box to Indicate | Nature of Notice P | enort or Other Data | | |
| NOTICE OF INTENTION TO: | i de la companya de | SEQUENT REPORT OF: | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON | REMEDIAL WORK | ALTERING CASING | | |
| TEMPORARILY ABANDON CHANGE PLANS | COMMENCE DRILLING | OPNS. PLUG AND ABANDONMENT | | |
| PULL OR ALTER CASING | CASING TEST AND CE | | | |
| OTHER: | Rescind F OTHER: MIT Test | P&A Intent & TA Well X | | |
| Describe Proposed or Completed Operations (Clearly state all pertinent details, as work) SEE RULE 1103. | nd give pertinent dates, includ | ting estimated date of starting any proposed | | |
| Please rescind prior P&A Intent approved by | your office 4/2 | 26/95. | | |
| Set 4-1/2" WL CIBP @ 2550'. Dump 2 sx cmt Attempted to load 4-1/2" csg w/45 BW. Tester Retest: Tested to 500 psi for 30 mins FPassed MIT. | d to 500 nsi - 1 | w/Dump Bailer. eaked off. | | |
| Verbal waiver from NMOCC to not witness to | | | | |
| Well TA'd 6/16/95. | - - | | | |
| | | | | |
| | | | | |
| | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and signature Conni Amith Conni Smith | | ng Tech. DATE 6/20/95 | | |
| TYPE OR PRINT NAME | | ТЕ ШЕРН ОМЕ NO.393-293-999 | | |
| (This space for State Use) APPROVED BY ROLLINGS TITLE TITLE APPROVED BY TITLE TITL | DEPUTY OIL & GAS IN | ISPECTOR, DIST. 43 DATE JUN 2 2 1995 | | |
| CONDITIONS OF APPROVAL, IF ANY: | <u></u> | DATE | | |
| | | | | |

State of New Mexico Submit I Copies to Appropriate Energy, Minerals and Natural Resources Department Form C-103 District Office Revised [.[-89 <u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION WELL API NO P.O. Box 2088 DISTRICTI 80-039-05193 Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Ty DISTRICT III STATE 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. NA SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE *APPLICATION FOR PERMIT 7. Lease Name or Unit Agreement Name (FORM C-101) FOR SUCH PROPOSALS.) Northcutt Type of Well: WELL X WELL | Name of Operator 8. Well No. EOG (New Mexico) Inc. Address of Operator 9. Pool name or Wildeat So. Blanco Pictured Cliffs 621 17th St., Ste. 1800, Den, CO 80293 Well Location 823 Feet From The North 1015 West Unit Letter Line and Feet From The 2 1W Rio Arriba Section iship 2314 Range 110. Elevation (Snow whether DF, RKB, RT, GR, etc.) Township **NMPM** County 7261' KB Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB OTHER: OTHER:_ 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed EOG requestsyour approval to plug & abandon the subject well according to the attached procedure. 1 6 1935 OH COM. DRY I hereby certify that the inform complete to the best of my knowledge and belief. SKINATURE . 10-12-95

TITLE -

- TITLE -

Consultant

DEPUTY OIL & BAS INSPECTOR, DEC. 40-

TELEPHONE NO. (303) 293-9999

APPROVED BY TRIGINATE SIGNED BY ERNIE BUSCH to witness

TYPE OR PRINT NAME

(Thus space for State Use)

Will Hardin

PLUG AND ABANDONMENT PROCEDURE

10-6-95

Northcutt #1 (PC) NW, Sec. 2, T23N, R1W Rio Arriba County, New Mexico

Note: All cement volumes use 100% excess outside pipe and 50' excess inside pipe. The stabilizing wellbore fluid will be 8.3 ppg, sufficient to balance all exposed formation pressures.

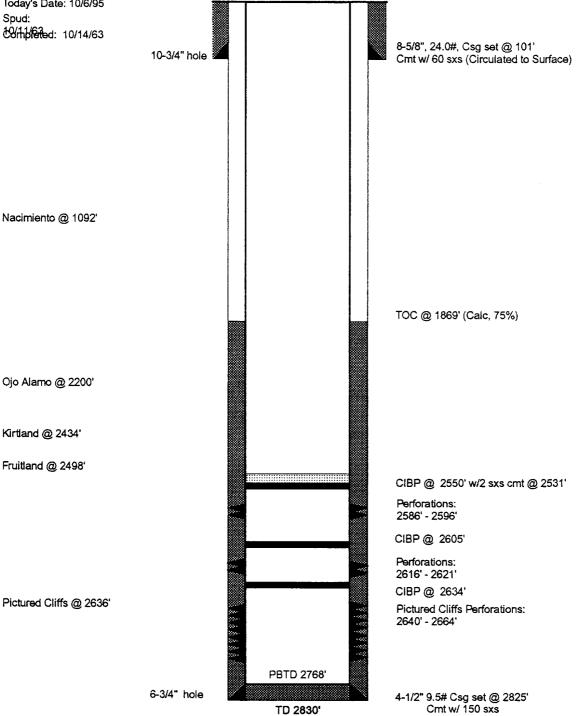
- 1. Install and test rig anchors. Prepare blow pit. Comply to all NMOCD, BLM and EOG safety rules and regulations.
- 2. MOL and RU daylight pulling unit. Conduct safety meeting for all personnel on location. NU relief line to flow back tank. Blow well down; kill with water as necessary. ND wellhead and NU BOP and stripping head; test BOP.
- 3. Plug #1 (Ojo Alamo top, 2531' 2265'): PU 2" tubing workstring and RIH with open ended tubing. Tag CIBP at 2531' or as deep as possible. Pump 20 bbls water. Mix 34 sxs Class B cement and spot a balanced plug over Ojo Alamo top. While WOC, PU 4-1/2" casing scraper or wireline gauge ring and round-trip to 1092'. RIH and tag cement. Pull above cement and load well with water; circulate casing clean. Pressure test casing to 500#. POH with tubing.
- 4. Plug #2 (Nacimiento top, 1142' 1042'): Perforate 3 or 4 squeeze holes at 1142'. Establish rate into squeeze holes if casing tested. PU 4-1/2" cement retainer and RIH; set at 1092'. Pressure test tubing to 1000#. Establish rate into squeeze holes. Mix and pump 36 sxs Class B cement, squeeze 24 sxs cement outside casing and leave 12 sxs cement inside casing to cover Nacimiento top. POH and LD tubing and setting tool.
- 5. Plug #3 (Surface): Perforate 2 or 3 holes at 151'. Establish circulation out bradenhead valve. Mix approximately 32 sxs Class B cement and pump down 4-1/2" casing, circulate good cement out bradenhead valve. Shut in well and WOC.
- ND BOP and cut off well head below surface casing flange. Install P&A marker with cement to comply with regulations. RD, MOL and cut off anchors. Restore location.

Northcutt #1

CURRENT

Blanco Pictured Cliffs South NW Section 2, T-23-N, R-1-W, Rio Arriba County, NM

Today's Date: 10/6/95



Northcutt #1

Proposed P & A

Blanco Pictured Cliffs South

NW Section 2, T-23-N, R-1-W, Rio Arriba County, NM

Today's Date: 10/6/95

Spud:

00/hp/fefted: 10/14/63

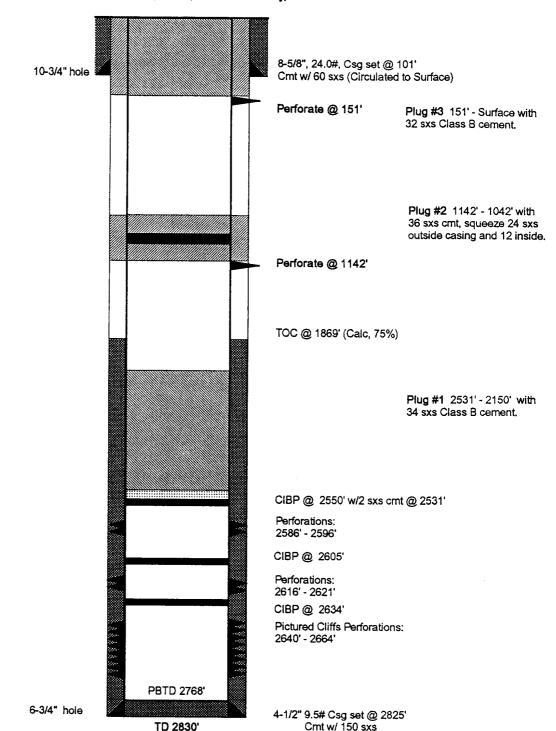
Nacimiento @ 1092'

Ojo Alamo @ 2200'

Kirtland @ 2434'

Fruitland @ 2498'

Pictured Cliffs @ 2636'



| Submit 3 Capies | | New Mexico | | | |
|--|--|---|---|---|--|
| to Appropriate District Office | Energy, Minerals and Na | atural Resources Department | Form C-103 Revised 1-1-89 | | |
| DISTRICT P.O. Box 1980, Hobbs, NM 88240 | | ATION DIVISION | WELL API NO. | 1.1.07 | |
| DISTRICT II | | Box 2088 | 30-039-05193 | | |
| P.O. Drawer DD, Anesia, NM 88210 | Santa Fe, New Mexico 87504-2088 | | 5. Indicate Type of Lease | | |
| DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410 | | | | STATE FEE X | |
| 1000 NO BIZZO NU., AZIEE, INNI 8/4[0 | | | 6. State Oil & Gas | Lease No. | |
| SUNDRY NOT | ICES AND REPORTS O | N WELLS | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | |
| \pm (DO NOT USE THIS FORM FOR PRO | DPOSALS TO DRILL OR TO (| DEEPEN OR PLUG BACK TO A | 7 1 age Name - 1 | ////////////////////////////////////// | |
| | RVOIR. USE "APPLICATION I -101) FOR SUCH PROPOSAL | | 7. CEASE (14) IDE OF C | Juit Agreement Name | |
| i. Type of Well: | | | Novet | . L. a # # | |
| MEIT AET XX | OTHER | | Northcutt | | |
| 2. Name of Operator | | | 8. Well No. | | |
| EOG (New Mexico) Inc 3. Address of Operator | | | #1 | | |
| 621 17th St., Suite 1800, Denver, CO 80293 | | | 9. Pool name or Wildeau South Blanco Pictured Cliffs | | |
| 4. Well Location | | | South Blance | J Pictured Cillis | |
| Unit Latter D: 823 | Feet From TheNor | th . Line and 1015 | Feet From T | he West Line | |
| Section 2 | 22N | 1น | | | |
| Section 2 | Township 23N ///// 10. Elevation (Show | Range 1W whether DF, RKB, RT, GR, etc.) | NMPM Rio Ar | riba County | |
| | ///// 7261' KB | ======================================= | į. | | |
| II. Check A | Appropriate Box to Ind | icate Nature of Notice, R | eport or Other I | Data | |
| NOTICE OF INT | ENTION TO: | | SEQUENT RE | | |
| PERFORM REMEDIAL WORK | DI LIC AND ADAMOON | | | | |
| | PLUG AND ABANDON | REMEDIAL WORK | A | LTERING CASING | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING | OPNS P | LUG AND ABANDONMENT $\overline{oldsymbol{X}}$ | |
| PULL OR ALTER CASING | | CASING TEST AND CE | MENT JOB | | |
| OTHER: | | OTHER: | | | |
| 12 Deprobe Departed on Completed On the | | | | | |
| Describe Proposed or Completed Operation SEE RULE 1103. | icos (Clearly state all pertinent de | etaits, and give pertinent dates, includ | ling estimated date of st | arting any proposed | |
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| Well was plugged and | abandoned per att | ached summary. | in the | | |
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| I nereby certify that the information above is true: | and complete to the hear of my burnet | dge and helief | | | |
| 0 | A. | | TT | 10 (00 (05 | |
| SIGNATURE Janice U. Fa | ree | mue <u>Engineering T</u> | ecn 11 | 12/20/95 (303) | |
| TYPE OR PRINT NAME Janice A. | Parker | | | (303 <i>)</i> TELEPHONE NO. 293 9999 | |
| (This space for State () | | N.M.O.C.D | | | |
| (time space (or some case) | | \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | | |
| APPROVED BY MANY State | MK | Deoah OLA Ti | spector | 2-70-9h | |
| CONDITIONS OF APPROVAL IF ANY: | | mice or the state of the state | · Pration | DATE (| |

State of New Mexico

EOG (New Mexico) Inc. Northcutt #1 (PC) 823' FNL, 1015' FWL, Sec. 2, T-23-N, R-1-W Rio Arriba County, NM Fee Lease

November 13,1995

Plug & Abandonment Report

Cementing Summary:

Plug #1 with 30 sxs Class B cement from 2527' to 2134' inside casing over Ojo Alamo top.

Plug #2 with retainer at 1076', mix 36 sxs Class B cement, squeeze 28 sxs cement outside casing from 1142' to 1042' and leave 6 sxs cement inside casing to 992' over Nacimiento top.

Plug #3 with 52 sxs Class B cement from 151' to surface, circulate 1 bbl good cement returns out bradenhead.

Plugging Summary:

- 11-9-95 Held Safety Meeting. Load A-Plus' 2-3/8" tubing work string (120 joints) onto M&R float. Drive rig, equipment and float to location. RU rig and equipment. Spot float with workstring on location. NU BOP and test. RU floor. PU and tally in hole with 80 joints 2-3/8" tubing workstring and tag cement above CIBP at 2527'. Shut in well. SDFD.
- 11-10-95 Safety Meeting. Load casing with 20 bbls water. Pressure test casing to 1000#, held OK. Plug #1 with 30 sxs Class B cement from 2527' to 2134' inside casing over Ojo Alamo top. POH with tubing. RU A-Plus wireline truck. Perforate 3 HSC squeeze holes at 1142'. Establish rate into squeeze holes 1-1/2 bpm at 500#. PU 4-1/2" cement retainer and RIH; set at 1076'. Pressure test tubing to 1500#, held OK. Plug #2 with retainer at 1076', mix 36 sxs Class B cement, squeeze 28 sxs cement outside casing from 1142' to 1042' and leave 6 sxs cement inside casing to 992' over Nacimiento top. POH with tubing and LD stinger. Perforate 3 squeeze holes at 151'. Plug #3 with 52 sxs Class B cement from 151' to surface, circulate 1 bbl good cement returns out bradenhead. Shut in well and WOC. Dig out wellhead. Open up well. ND BOP. Cut wellhead off. Mix 10 sxs Class B cement and install P&A marker. Too windy to RD. Prepare to move off location.

Notified BLM at 8:00 AM on 11-9-95.

No BLM representative was on location.