Form 3160-3 (November 1983) (formerly 9-331C)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

## **UNITED STATES**

SUBMIT IN TRIPLICATE\*

(Other instructions on reverse side)

Form approved.

Budget Bureau No. 1004–0136

Expires August 31, 1985

AREA MANAGER

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK  18. THE OF WORK  DETERMINE TO DRILL DEEPEN, OR PLUG BACK  D. THY OWNEL  ONL. D. WILL DEEPEN DE		T OF THE INTE		5.	LEASE DESIGNATION AND SERIAL NO.
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Plan to drill a 5,800' Morrison test. If the well is productive it will be cased as shown above and completed as indicated on the 10-point plan. If a dry hole is drilled it will be plugged as per Bureau of Land Management and the State of New Mexico requirements.  **Modely BCP Program to include Double Rain 1874 CON. DIV (Fige & Blind 1200) Not less than 3000 DIST. 3  IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive sone and proposed new product zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowd preventer program (** any. )			_	1	
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(This space for Federal or State office use)  APPROVED	(This space for Federal or State office use)	<u> </u>			APPROVED
APPROVAL DATE AS AMENDED					VC VIVENDED

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instructions On Reverse Side

## WELL LOCATION AND ACREAGE DEDICATION PLAT

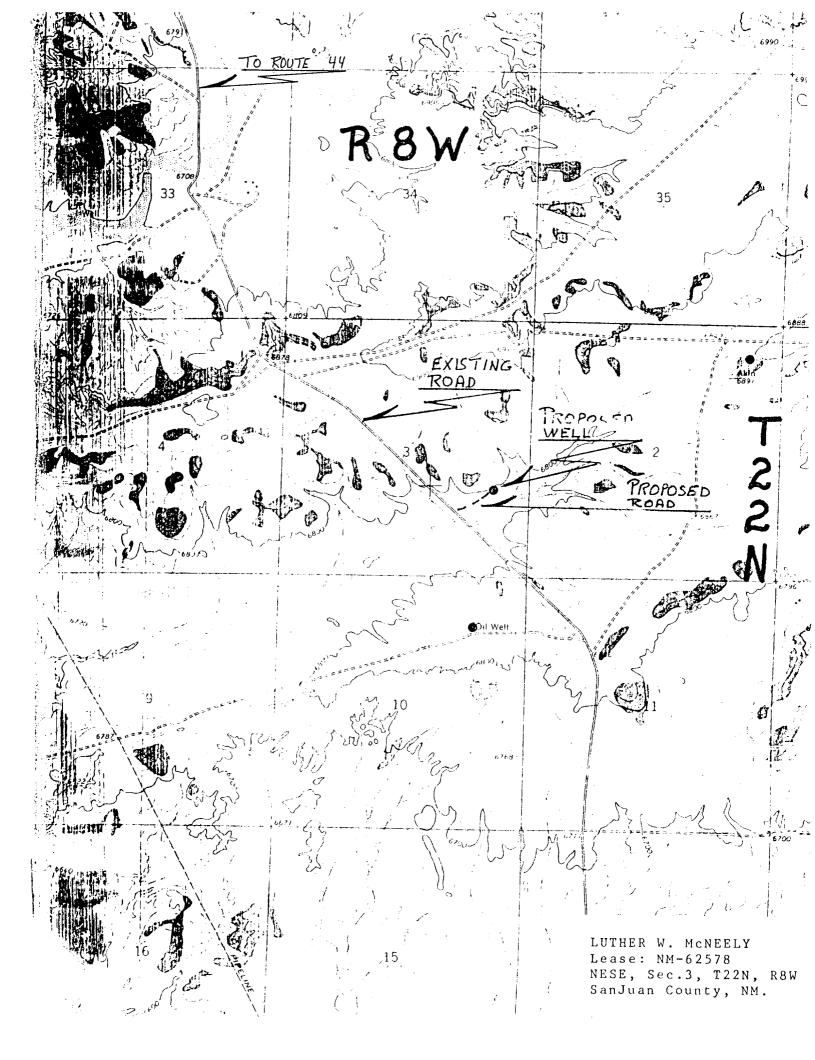
All distances must be from the outer boundaries of the Section. Well No. LUTHER A. MCNEELY Section Township Unit Letter 8 WEST SAN JUAN 22 NORTH Actual Footage Location of Wells feet from the Dedicated Acreage: Ground Level Elev. MORRISON 6794 1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below. 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty). 3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling. etc? If answer is "yes," type of consolidation \_\_\_\_ Yes If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.). No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commis-CERTIFICATION I hereby certify that the Information con-AGENT I hereby certify that the well location AUGUST Registered Professional Engineer and/or Land Surveyor GEORGE R. TOMPKINS Certificate No.

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Form 3160-5 (November 1983) (Formerly 9-331)

## UNITED STATES SUBMIT IN TRIPLICATES Other Instructions on reverse side)

Budget Bureau No. 1004-0135 Expires August 31, 1985

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BUREAU OF LAND MANAGEMEN I	NM-625/8
SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to deepen or plug back to an entering report of the manual state of the control of the	NA
	7. UNIT AGREEMENT NAME

	Use "APPLICA"	TION FOR PERMIT—" for such propos	EIS.)		
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3.	ADDRESS OF OPERATOR		MIGION RESOURCE AREA	D. WHILL NO.	
	PO Box 2212, Rock	Springs, Wyoming	82902	Surge Cleck	
<b>š</b> .	LOCATION OF WELL (Report location cle See also space 17 below.) At surface	arly and in accordance with any Stat	e requirements.*	Wildcat A	1000150se
	NE SE 1850' FS	SL & 790' FEL		11. SEC., T., R., M., OR B. SURVEY OR AREA	ATAMTO ÉLLUP
				Sec. 3, T22	N, R8W
14	PERMIC NO.	15. ELEVATIONS (Show whether DF, RT,	GR, etc.)	12. COUNTY OR PARISH	13. BIZIE
		6,794' GR		San Juan	N.M.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:			Coderdonus resort on		
<u></u>	7				
TEST WATER SHUT-OFF	PULL OR ALTER CASING		WATER SHUT-OFF	REPAIRING WELL	
FRACTURE TREAT	MULTIPLE COMPLETE		FRACTURE TREATMENT	ALTERING CASING	
SHOOT OR ACIDIZE	ABANDON*		SHOOTING OR ACIDIZING	ABANDONMENT*	
REPAIR WELL	CHANGE PLANS		(Other) (Norm: Report_results of m	ultiple completion on Well	
(Othor)	a 1 / / 1.1 -	1 1	Completion or Recompletion	Report and Log form.)	

Other) additional information x Completion or Recompletion Report and Log form.)

11. PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markets and tones pertined in this work.)

Casing & Cementing Program:

Surface casing: 300' of 8-5/8", 24#/ft, K-55 ST&C and cement to surface with 210 sx class "B" w/2% CaCl2 and 4% Cal-Seal.

Production Casing: 5800' of  $5\frac{1}{2}$ ", 17#/ft, K-55 LT&C.

1st stage, TD to 3100', Lead slurry 635 sx 50-50 Poz. C1 "B" w/l0%salt BWOW, 6/10 of 1% D-60 Floc., tail end 125 sx C1 "B", w/10% salt BWOW 6/10 of 1% D-60 Floc.

2nd stage, 330' to surface, lead slurry 580 sx Cl "B" 65% cement 75% Poz., 6% Gel 4# D-29 Flo-seal, tail end 50 sx cl "B" 2% CaCl2

All potentially producing hydrocarbon zones will be cemented off.

Cash bond has been applied for.

18. I hereby certify that the foregoing is true and correct		APPROVED
SIGNED NO CHILL	TITLEAgent	AS AMENDED
(This space for Federal or State office use)		
APPROVED BY	TITLE	DATE SEP 3 0 1986 —
CONDITIONS OF APPROVAL, IF ANY:		$\sim$ $\sim$ 1

\*See Instructions on Reverse Side

FARMINGTON COPY

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.