

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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

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—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. SF 078895
2. NAME OF OPERATOR DEKALB Energy Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME -
3. ADDRESS OF OPERATOR 1625 Broadway - Denver, CO 80202		7. UNIT AGREEMENT NAME -
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 990' FNL & 990' FEL (NE/4 NE/4)		8. FARM OR LEASE NAME Mudge "A"
14. PERMIT NO. N.A.		9. WELL NO. 10
15. ELEVATIONS (Show whether DP, WT, GR, etc.) 6091' GR		10. FIELD AND POOL, OR WILDCAT West Kutz P.C.
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7, T27N-R11W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) Recomplete in Fruitland Coal <input checked="" type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

1. MI & RU. TOH with production equipment, check PBDT. Clean out hole to 1880', if necessary.
2. Run 1880' of 4-1/2" casing, cement casing to surface.
3. TIH with bit & scraper, check PBDT, TOOH.
4. Perforate the Fruitland Coal from 1803'-1805' with 4 SPF.
5. Run 2-3//8" tubing and packer, spot 200 gallons of 7-1/2% HCL and breakdown the perforations at 2-3 BPM +/- 2,000 psi.
6. Frac the Fruitland Coal down 2-3/8" tbg and 8 BPM w/+/- 2,000 Psi with 16,000 gals Boragel and 34,000# sand. Proceed the frac with a 40,000 SCF Nitrogen pad, and carry 300 SCF/BBL N₂ throughout the job.
7. Open the well slowly and flow Nitrogen back, put well on production.

RECEIVED

OCT 25 1990

OIL CON. DIV.
DIST. 3

18. I hereby certify that the foregoing is true and correct

SIGNED

Thomas J. Ryan

TITLE

District Engineer

DATE

October 11, 1990

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

NMOCD

DATE

APPROVED

OCT 17 1990

FOR Ken Townsend
AREA MANAGER

*See Instructions on Reverse Side