

UNITED STATES
DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DEEPEN

1a. TYPE OF WORK: ☒ DRILL ☐ DEEPEN

b. TYPE OF WELL: ☐ OIL WELL ☒ GAS WELL ☐ OTHER

2. NAME OF OPERATOR: Cross Timbers Operating Company

3. ADDRESS AND TELEPHONE NO.: 2700 Farmington Ave., Bldg. K, Ste 1 Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements):
At surface 1980
660' FNL & 1705' FWL Section 9, T27N, R10W, Unit C
At proposed prod. zone
Same

5. LEASE DESIGNATION AND SERIAL NO.: SF-077382

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: 1

7. UNIT AGREEMENT NAME: 25756

8. FARM OR LEASE NAME, WELL NO.: R. P. Hargrave "M" #1

9. API WELL NO.: 30-045-30148

10. FIELD AND POOL, OR WILDCAT: Fulcher Kutz Pictured Cliffs

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 9, T27N, R10W

12. COUNTY OR PARISH: San Juan

13. STATE: NM

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE: Please see attached Surface Use Program.

15. DISTANCE FROM PROPOSED LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any): 660'

16. NO. OF ACRES BY LEASE: 160.00

17. NO. OF ACRES ASSIGNED TO THIS WELL: NW/4 - 165.53 acres

18. DISTANCE FROM PROPOSED LOCATION TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.: 1,668'

19. PROPOSED DEPTH: 2,150'

20. ROTARY OR CABLE TOOLS: Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.): 6072 GR

22. APPROX. DATE WORK WILL START: 3/2000

23. PROPOSED CASING AND CEMENTING PROGRAM				
SIZE OF HOLE	GRADE SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
8-3/4"	7", J-55	20#	200'	75 sx
6-1/4"	4-1/2", J-55	10.5#	2,150'	165 sx

Surface : 7", 20#, J-55, STC casing at 200'.
75 sx Type III cement containing 1/4# celloflack, 2% CaCl₂ (14.6 ppg, 1.39 cuft/sx).
Production: 4-1/2", 10.5#, J-55, STC casing at 1,850'.
165 sx of 35:65 Poz/Type III cement with 10 pps CSE, 3% KCl water, 1/4 pps celloflake, 0.65% bwoc FL-62, 6% gel (12.5 ppg, 2.07 cuft/sx).

Remarks: Use 80% excess of calculated annular volume to bring TOC up to surface.

proposed program plus tax to 43 CFR 3165.3
and apply pursuant to 43 CFR 3165.4.

DRILLING OPERATIONS AUTHORIZED ARE
SUBJECT TO COMPLIANCE WITH ATTACHED
"GENERAL REQUIREMENTS"

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED: Thomas DeLong TITLE: Thomas DeLong, Prod Engineer DATE: 2/11/2000
(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____
Application approval does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.
CONDITIONS OF APPROVAL, IF ANY:

NMOL

APPROVED BY: /s/ Charlie Beecham TITLE: _____ DATE: APR 26 2000

*See Instructions On Reverse Side

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.

District I
PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised February 21, 1994

District II
PO Drawer 00, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION

Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

District III
1000 Rio Brazos Rd., Aztec, NM 87410

PO Box 2088 200 MAR 24 5:12:54
Santa Fe, NM 87504-2088

District IV
PO Box 2088, Santa Fe, NM 87504-2088

070 FULCHER, KUTZ PICTURED CLIFFS
☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number 30-045-30148		*Pool Code 77200	*Pool Name FULCHER KUTZ PICTURED CLIFFS
*Property Code 25758	*Property Name R. P. HARGRAVE "M"		*Well Number 1
*OGRIID No. 167067	*Operator Name CROSS TIMBERS OPERATING COMPANY		*Elevation 6072'

10 Surface Location

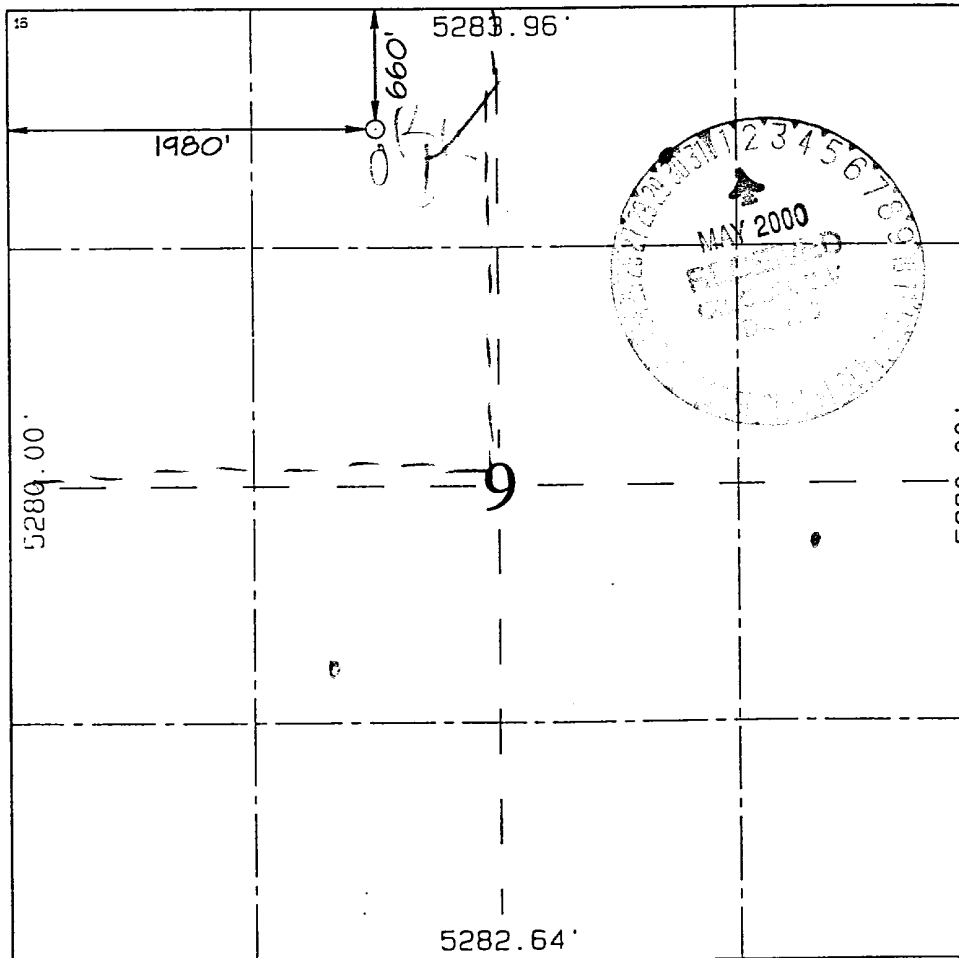
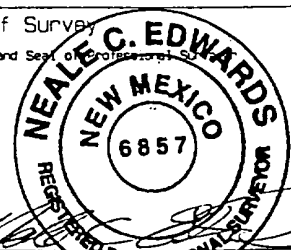
UL or lot no. C	Section 9	Township 27N	Range 10W	Lot Idn	Feet from the 660	North/South line NORTH	Feet from the 1980	East/West line WEST	County SAN JUAN
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11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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12 Dedicated Acres 160 NW/4	13 Joint or Infill	14 Consolidation Code	15 Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

	17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Signature Tom DeLong Printed Name Production Engineer Title 3-22-2000 Date
	18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my belief. MARCH 8, 2000 Date of Survey Signature and Seal of Professional Surveyor  Certificate Number 6857

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter and abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Cross Timbers Operating Company

3a. Address

2700 Farmington Ave, Bldg K Ste 1 Farmington, NM 87401 505-324-1090

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

660' FNL & 1,980' FWL Section 9, T27N, R10W, Unit C

3b. Phone No. (include area code)

5. Lease Serial No.

SF-077382

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No

8. Well Name and No.

R. P. Hargrave "M" #1

9. API Well No.

10. Field and Pool, or Exploratory Area

Fulcher Kutz Pictured Cliffs

11. County or Parish, State

San Juan NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☒ Notice of Intent

☐ Subsequent Report

☐ Final Abandonment Notice

TYPE OF ACTION

☐ Acidize

☐ Alter Casing

☐ Casing Repair

☒ Change Plans

☐ Convert to Injection

☐ Deepen

☐ Fracture Treat

☐ New Construction

☐ Plug and Abandon

☐ Plug Back

☐ Production (Start/Resume)

☐ Reclamation

☐ Recomplete

☐ Temporarily Abandon

☐ Water Disposal

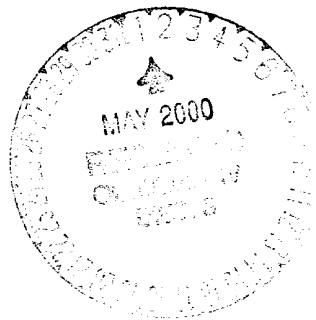
☐ Water Shut-Off

☐ Well Integrity

☐ Other

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximated duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

Please note that the above mentioned well has been re-staked at a different location. This new location is approx 375' from the original location is shown in the original APD (dated 2/11/00). A copy of the new location plat is enclosed for your review.



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Jeffrey W Patton

Title

Production Engineer

Date 03/22/00

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

ENVIRONMENTAL

Date

4-21-00

Office

PROTECTIVE

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

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(Instructions on reverse)

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1. Type of Well
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2. Name of Operator

Cross Timbers Operating Company

3a. Address

2700 Farmington Ave, Bldg K Ste 1 Farmington, NM 87401 505-324-1090

3b. Phone No. (include area code)

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

405 FNL & 1.705 FWL Section 9, T27N, R10W, Unit C
660 1980

5. Lease Serial No.

SF-077382

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No

8. Well Name and No.

R. P. Hargrave "M" #1

9. API Well No.

10. Field and Pool, or Exploratory Area

Fulcher Kutz Pictured Cliffs

11. County or Parish, State

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12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximated duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

The acres assigned to this well (as shown on the APD dated 2/11/00) should be changed from 165.53 to 160 acres.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Thomas DeLong

Title

Production Engineer

Date 02/17/2000

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date APR 26 2000

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

FARMINGTON FIELD OFFICE
BY

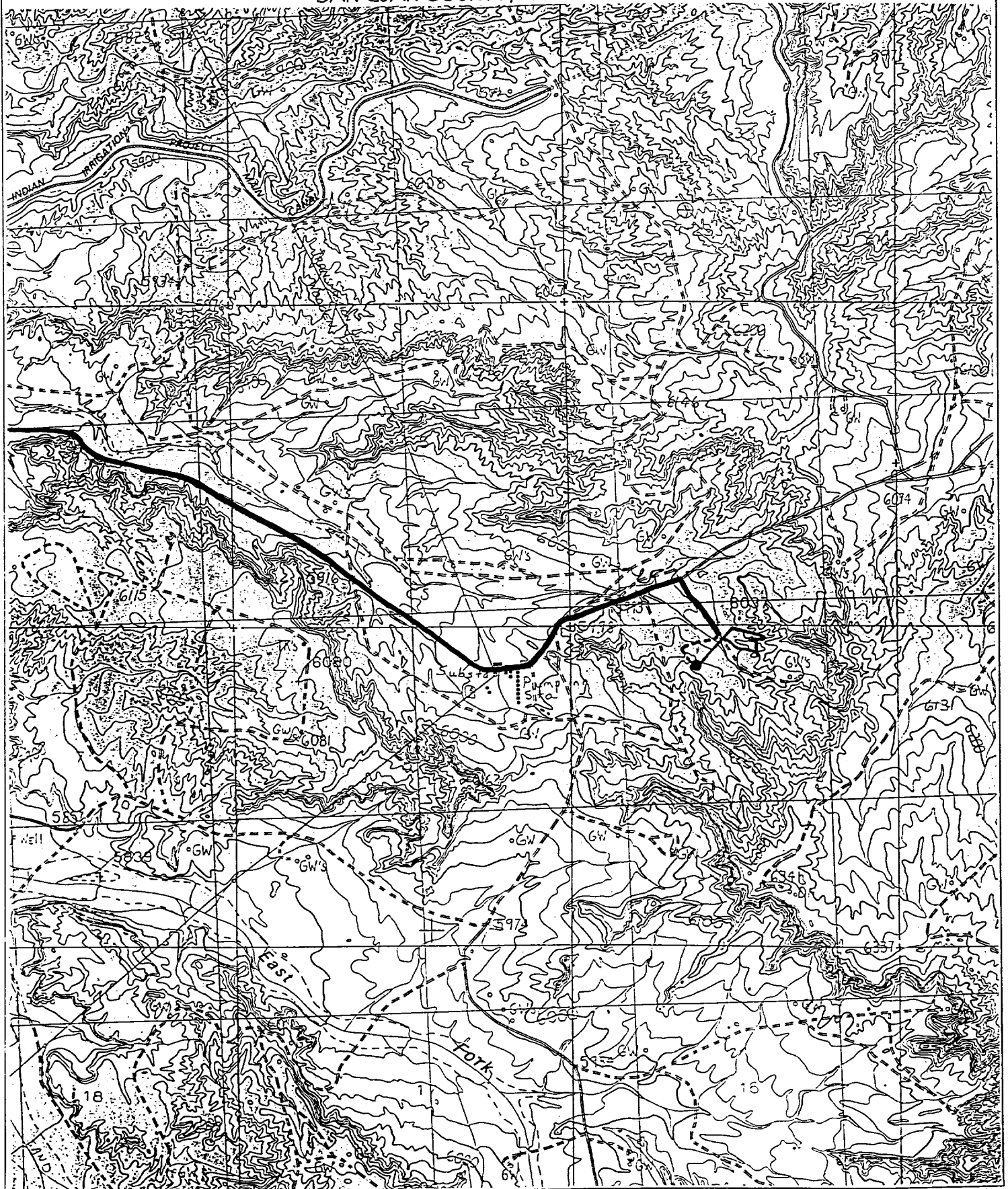
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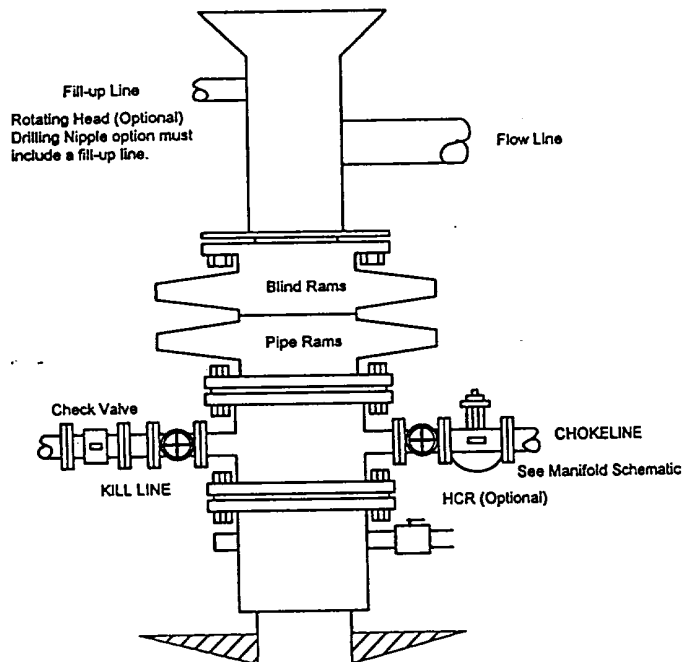
CROSS TIMBERS OPERATING COMPANY R.P. HARGRAVE M #1

660' FNL & 1980' FWL, SECTION 9, T27N, R10W, N.M.P.M.

SAN JUAN COUNTY, NEW MEXICO



**BOPE SCHEMATIC FOR DRILLING OPERATIONS
CLASS 1 - NORMAL PRESSURE
CROSS TIMBERS OPERATING COMPANY STANDARD**



**CHOKE MANIFOLD SCHEMATIC FOR DRILLING OPERATIONS
2M SERVICE
CROSS TIMBERS OPERATING COMPANY STANDARD**

