	UNITED STATES DEPARTMENT OF THE INT BUREAU OF LAND MANAGEM	ENT		31, 1985
(Do not use this fo	RY NOTICES AND REPORT	due harb to a different remervoir.	N/A	MB
OIL GAR WELL Z NAME OF OPERATOR Richmond Petr	отнек roleum Inc. (214) 720-	7730	N/A 8. FARM OR LEASE NAM Federal	
2651 N. Harwa Location of Well (Re) See also space 17 below	ood, Suite 500, Dallas, TH. 7	5201	9. WELL NO. #1 10. PIELD AND POOL, OR Basin Fruitland 11. SEC., T., R., M., OR R SURVEY OR ARMA 14	wildeat I Coal Gas
14. PERMIT NO. 30-045-27792	6,408' ungrade		12. COUNTY OR PARISE San Juan	18. STATE NM
16.	Check Appropriate Box To Indica		Other Data	
PRACTURE TREAT NHOOT OR ACIDIZE REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR Oproposed work. If nent to this work.)	PULL OR ALTER CARING MULTIPLE COMPLETE ABANDON* CHANGE PLANS COMPLETED OPERATIONS (Clearly State all per well is directionally drilled, give subsurface	Completion or Recomp	ALTERING CA ABANDONMEN s of multiple completion eletion Report and Log for , including estimated date all depths for all markers	on Well
·	erator has changed from Amase name and well number h		s nomenclature.	
			AUG21 1990 OIL CON. D DIST. 3	
SIGNED SIGNED	the oreging by true and correct	Consultant	DATE 5-19-	90

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

Form 3160-5 (November 1983) (Formerly 9-331) DEPARTMENT OF T	ATES HE INTERIOR	SUBMIT IN TRIPLICATES (Other instructions on reverse side)	Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO.
BUREAU OF LAND N			SF 078132
SUNDRY NOTICES AND (Do not use this form for preposals to drill or to Use "APPLICATION FOR PERM	REPORTS ON	WELLS to a different reservoir.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1.			7. UNIT AGREEMENT NAME
OIL GAS X OTHER			
2. NAME OF OPERATOR			8. FARM OR LEASE NAME
	(214) 720-773	10	Federal 14
3. ADDRESS OF OPERATOR	-11-2 TV 752	201	#1
2651 N. Harwood, Suite 500 D 4. LOCATION OF WELL (Report location clearly and in account	ordance with any Stat	e requirements.•	10. FIELD AND POOL, OR WILDCAT
See also space 17 below.) At surface			Basin Fruitland Coal
14501 ENI 01001 EEI			11. SEC., T., B., M., OR BLK. AND SURVEY OR ARMA
1470' FNL, 2130' FEL			14- 3003- R9W.
15 RIPVATIONS	(Show whether DF, RT,	GR. etc.)	12. COUNTY OR PARISH 13. STATE
	408' GR		San Juan NM
	T 1 % / N1 .	(NI - ti - D	Osh an Deser
• •	to indicate inatu	re of Notice, Report, or	Other Daid
NOTICE OF INTENTION TO:		80885	
TEST WATER SHUT-OFF PULL OR ALTER CA	<u> </u>	WATER SHUT-OFF	ALTERING CASING
FRACTURE TREAT MULTIPLE COMPLE	*TE	FRACTURE TREATMENT SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL CHANGE PLANS		(Other) Spud	x
(Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly		Completion or Recom	s of multiple completion on Well pletion Report and Log form.)
Spud well at 6:30 PM o	on 06/14/90.		
PERMITTER ALPHANTING		<u>US</u>	ECEIVED AUC21 1990 L CON. DIV. DIST. 2
18. I hereby certify that the foregoing is true and correct			DATE 06/18/90
SIGNED Daw De hueuthay	TITLE Eng	ineer	DATE
(This space for Federal or State office use) APPROVED BY	TITLE	AC	CCEPTED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY:	i i i j		AUG 17 1990
•	Es a lucturations of	n Pavama Sida	FARMINGTON RESOURCE AREA

Form approved.

Ferm 31605 (November 1983)	UNITED STATES DEPARTMENT OF THE INTER	SUBMIT IN TRIPLICATES	Expires August 31, 1903
(Formerly 9-331)	BUREAU OF LAND MANAGEMEN		5. LEASE DESIGNATION AND SERIAL NO. SF 078132
	DRY NOTICES AND REPORTS form for proposals to drill or to deepen or plug Use "APPLICATION FOR PERMIT—" for such	back to a different reservoir	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
OIL GAS WELL WELL	☐ STHEE		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR			8. FARM OR LEASE NAME
Richmond Petr			Federal 14
P.O. Drawer 2	039, Farmington, NM 87499		9. WELL NO.
See also space 17 belo	Report location clearly and in accordance with an well in the second sec	y State requirements.*	10. FIBLD AND POOL, OR WILDCAT Basin Fruitland Coal 11. SEC., T., E., M., OR BLE. AND BURVEY OR ARMA
			14-29N-9W
14. PERMIT NO.	15. ELEVATIONS (Show whether D	F, RT, GR. etc.)	12. COUNTY OR PARISH 13. STATE
	! 6408' GR		San Juan NM
16	Check Appropriate Box To Indicate I	Nature of Notice, Report, or (Other Data
Ĭ	NOTICE OF INTENTION TO:	BUBBEQ	UENT REPORT OF:
TEST WATER SHUT-O		WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT SHOOT OR ACIDIZE	MULTIPLE COMPLETE	PRACTURE TREATMENT SHOOTING OR ACIDIZING	ABANDONMENT®
REPAIR WELL	CHANGE PLANS	(Other)	
17. DESCRIBE PROPOSED OF	COMPLETED OPERATIONS (Clearly state all pertine well is directionally drilled, give subsurface locally drilled).	Completion or Recomp	s of multipie completion on Well leletion Report and Log form.) , including estimated date of starting any all depths for all markers and zones perti-
	FEB 0 4 199; OIL CON. D. DIST. 3	YEDOV., ACCEPTED JAN	P FOR RECORD 1 3 0 1301 OH RESOURCE AREA
SIGNED Daws	Deluenthal TITLE !	Petroleum Engineer	August 7, 1990
(This space for Feder	rai or State office use)		
APPROVED BYCONDITIONS OF AF	PROVAL, IF ANY:		DATE

*See Instructions on Reverse Side NMOCD

Submit 5 Capies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

I.

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator					- 		Well A	Pl No.		
Richmond Petroleum	Inc.						30	-045-2779	2	
Address P.O. Drawer 2039, F	armino	top M	м 87	7499						
Reason(s) for Filing (Check proper box)	armrug	con, M	07	777	Otha	s (Please expla	in)			
New Weil		Change in	Transpo	orter of:		i (i iida dipa	,			
Recompletion	Oil		Dry Ga	L						
Change in Operator	Casinghea	d Gas	Conder							
f change of operator give name	Campio	<u> </u>								
and address of previous operator	NID F T	A CIP								
II. DESCRIPTION OF WELL A	AND LEA		Pool N	lame Includi	ng Formation		Kind o	f Lease	I e	ase No.
Federal 29-9-14		1	1		itland C	nal		Federal or Fee	SF 07	
Location		J			rezulta o				101 07	0102
Unit LetterG	:14	70 .	_ Feet Fi	rom The	North Line	and	0 F∞	et From The	East	Line
Section 14 Township	2	9N	Range	9W	, NI	ирм,	San Jua	ın ,		County
III. DESIGNATION OF TRANS	CD/ADTE	ED OF O	II AN	ID NATH	DAI GAS					
Name of Authorized Transporter of Oil		or Conde			Address (Giv	e address to wi	hich approved	copy of this form	n is to be se	าป)
Name of Authorized Transporter of Casing			or Dry	Gas X				copy of this form		ni)
El Paso Natural Gas		10	l m					gton, NM	0/499	
If well produces oil or liquids, give location of tanks.	Unit	Sec. 	Twp.	_i	Is gas actuall Ye	s	When No	vember,	1990	
If this production is commingled with that I IV. COMPLETION DATA	from any ou	her lease or	pool, gi	ive comming	ling order num	ber:				
Designate Type of Completion	- (X)	Oil Wel	1	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v
Date Spudded	Date Con	ipl. Ready t			Total Depth	21011		P.B.T.D.	2601	
6/14/90 Elevations (DF, RKB, RT, GR, etc.)		718/90 Producing I		<u> </u>	Top Oil/Gas			Tubing Depth	068'	
6408' GR	Fru	itland	Coal	1		2820 '			020'	
Perforations 2820'-2830', 2864'-	20221	205/1	_2074	<u></u>				Depth Casing	Shoe LO1'	
2020 -2030 , 2004 -					CEMENT	NG RECOR	≳D.	1 3		
UOLE 8175		ASING & T			, CLIVILLIA I I	DEPTH SET		SA	CKS CEM	ENT
HOLE SIZE	<u> </u>	8 5/8		- JIEE	1	250'		<u> </u>	150	
7 7/8"	-	$\frac{3}{5}\frac{3}{1/2}$			 	3101'	· · · · · · · · · · · · · · · · · · ·		450	
	1				1					
	- -									
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABLI	€ .						
OIL WELL (Test must be after			e of load	d oil and mu					r fuil 24 hoi	urs.)
Date First New Oil Run To Tank	Date of 'I	l'est			Producing N	lethod (Flow, p	ownp, gas lift,	eic.)		
Least of Tag					Casing Print	Tarre A	75 6 (A) (S) H (A)	PChoke Size		
Length of Test	Tubing P	Tessure			Cesting Light		3- 8 T			
Actual Prod. During Test	Oil - Bbl	s.			Water - Bol	<u> </u>	0.4000	G MCF		
Transfer Paring 1900						DEGJ	<u>9 1990</u>			
GAS WELL						OIL CO	O. MC	V		• •
Actual Prod. Test - MCF/D 335	Length o	M Test 24 hrs.			Bbls. Conde	nsaw/MM	57. 3	Gravity of Co	ondensate	
Festing Method (pitot, back pr.)	l l	Pressure (Sh			Casing Pres	sure (Shut-in)		Choke Size		
Back Pressure]3	358				358		1/4	4"	
VI. OPERATOR CERTIFIC							NSERV	ATION [אופועונ	NC
I hereby certify that the rules and regu										- 11
Division have been complied with and is true and complete to the best of my				ov€				FEB 07	7 1991	
to any and complete to the over of thy					Dat	e Approv	ed			
Daya Delico	uth	d c			_	~~·	NAL 645	n nv =n+!!= :	oueou.	
Signature		<u> </u>	011-	En c 4	By.	ORIGI	nal signe	D BY ERNIE	SUSCH	
Dana Delventhal Printed Name	- 	retrol	eum	Enginee	11	DEPUTY	OIL & GA	s inspector,	DIST. #3	
12/18/90		(505)		-	Titl	θ				
Date	, ,,,,,,		elephon							
			•					فقادي بنديجي بالمراجع		

- 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.
- d) Senarate Form C-104 must be filed for each rood in multiply completed wells.

Form 3160-4 (November 1983) (formerly 9-330)

UNITED STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN DUPLICATE.

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

(See other in-structions on reverse side) 5. LEASE DESIGNATION AND SERIAL NO.

		BUREA	U OF LAND	MANAG	EMENT			/			SF 07	813	2
WELL CON	MPLET	ION O	R RECOM	PLETIO	N REI	PORT	ANI	LOC	; *	6. IF	INDIAN.	ALLOT	TEE OR TRIBS NAME
1a. TYPE OF WELL	. :	ott.	GAS X							7. EN	T AGRE	MENT	NAME
L TYPE OF COMP		WELL L	WELL ES	DRY	U Ott	er	ال ا د	22	711 2	19"		, -	r - + + + + + + + + + + + + + + + + + +
*	WORK [T DEED [- Princip	DIFF.						S 154	M UR L	FASE	NAME
NEW WELL X	OVER L		BACK L.	RESVR.	Ott	ner - j	15 7	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					9-9-14
Richmond Pe		eum Inc.								9. WI	LL NO.		
3. ADDRESS OF OPER			·							1			
P.O. Drawer	2039), Farmi	ngton, NM	8749	9					10. F	ELD AND	POOL	. OR WILDCAT
4. LOCATION OF WEL						tate requ	ircment	1) •		l R	aein	Fru	itland Coal
		NL, 2130)' FEL							11. s	EC., T., R R AREA	., M., C	itland Coal
At top prod. inte	rval rep	orted below								_			
At total depth	SAME									1	4-291	1-9W	NMPM
			ĺ	14. PERM	IT NO.		DATE	SSUED		12. c	DUNTY O	R	13. STATE
				30 04	5 2779	92	5/3	/90		San	Juan		NM
15. DATE SPUDDED	16. DAT	E T.D. REAC!	HED 17. DATE	COMPL. (Re	eady to p	rod.) 1		ATIONS (D		RT, GR, 1	TC.)•	19. E	LEV. CASINGHEAD
6/14/90	6/2	20/90	10)/18/90)		6	408 ' G	R				
20. TOTAL DEPTH, MD A	TVD	21. PLUG. B	CK T.D., MD & TV	D 22. II	F MULTIP	LE COMP	L.,	23. INTE	RVALS LED BY	ROTA	RY TOOL	8	CABLE TOOLS
3101'		3068	3 '			-			→		X		
24. PRODUCING INTER	VAL(S).	OF THIS COM	PLETION-TOP,	BOTTOM, NA	AME (MD	AND TVD	•					25	. WAS DIRECTIONAL SURVEY MADE
2820 ' - 297	76' E	ruitlana	i Coal										
2020 - 29	/ O F	. urcranc	COAL									_1	
Dual Induct			ompensated	Neutr	on, Fo	ormati	ion D	ensity	,			27. w	NO NO
28.			CASIN	G RECORI	D (Report	all strin	gs set in	well)				-	
CABING SIZE	WEIG	HT, LB./FT.	DEPTH SET	. 1	HOLE				ENTING			Ī	AMOUNT PULLED
8 5/8"	24		250		12	1/4"	15	0 sx 0	lass	В			
5 1/2"	15	.5	3101		7	7/8"	50	0 sx 0	lass	В			
							73	<i>C</i>					
	_												
29.		LIN	ER RECORD		. 3			30.		TUBIN	RECO	RD	
SIZE	TOP (M	(0)	TTOM (ND)	ACKA CEN	ENT.	SCREEN (MD)	SIZE			SET (MI	D)	PACKER SET (MD)
			262	W P	$\Pi \Gamma$			2 3/8	<u>"</u> _	2999) '		
<u> </u>		111											
31. PERFORATION REC		erval, istiga	FEBO71	1001		32. 							EEZE, ETC.
2820 ' - 28	30 '		rcovi	1331	_	DEPTH I						0 0 7 1	MATERIAL USED
2864' - 29		0	IL CON	MA	· _	2820 '	- 29	76'			Gal		
2954 ' - 29	76 '				_						O# 40		
			DIST.	3			_		21	0,00	O# 12	/20	
Total of 3	60 O.	5" hole	S										
33.*					PRODU			<u>.</u>					s (Producing or
DATE FIRST PRODUCTI	ION	PRODUCTI	ON METHOD (FI	owing, gas	iift, pum	ping—eiz	e ana t	pe of pur	(p)		shw	t-in)	on Pipeline
DATE OF TEST	HOURS	TESTED	CHOKE SIZE	PROD'N. TEST PE		OIL-BBL		GAS-M		WAT	ER—BBL	. 1	GAS-OIL RATIO
11/9/90	2	4	1/4"	<u> </u>	→			33					
FLOW. TUBING PROCE.	CABING	PRESSURE	CALCULATED 24-HOUR RATE	OILBB	t		—мс т. 335		WATER-	—₩BL.		OIL G	RAVITY-API (CORE.)
-358	<u>کے ا</u>	<u> </u>	>										•
34. DISPOSITION OF G.	AS (Sold,	, used for fue	n, vented, etc.)						A	CCE	PIE	ard.	<u>R</u> REGORD
Vented													
35. LIST OF ATTACH	m ents										FEB	07	1991
36. I hereby certify	that the	foregoing s	ind attached inf	ormation i	s complet	e and co	rrect as	determin	ed from	all AS	ilable	3ce Edi	HURCE AREA
	•	<u> </u>	40							FARI			16/91
SIGNED	'ــصـــ'	مبلطم	uthal_	_ TITI	LE P	etrole	e <u>um</u> E	nginee	r B		DA/DI	/	10/71

TRUE Vert. Depth TOP GEOLOGIC MARKERS MEAS. DEPTH NAME 38. 37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries): DESCRIPTION, CONTENTS, ETC. 2981 BOTTOM Œ 2728 2981 TOP FORMATION Fruitland Pictured Cliffs Form 3160-5 (November 1983) (Formerly)=331)

UN ED STATES SUBMIT I (Other Interpretation of THE INTERIOR verse alde)

SUBMIT IN TRIPI
(Other instructions

TE.

Form approved.

Budget Bureau No. 1004-0135

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO

BUREAU OF LAND MANAGEMENT

		5/=	-c 75%	3	2		
6.	IF	INDIAN.	ALLOTTEE	OR	TRIBE	NA:	ЯΕ

SF-078132

	SUNDRY	NOTICES	AND	REPORTS	ON	WELLS	ا ا الموسد السا
Do not	this form fo	e propossis to	drill or to	deepen or plug MIT—" for such	DACK TO	g atmetenr	reservoir.

MDIAN.	ALLUTTEE	UK	LEIDE	

Use AFFLICATION 1 CM 1 SM	7. UNIT AGREEMENT NAME
OIL GAS WELL WELL WOTHER	8. PARM OR LEASE NAME
2. NAME OF OPERATOR	Present City ANT.
Richmond Petroleum, Inc.	Federal 14 19.914
3. ADDRESS OF OPERATOR	
P. O. Drawer 2039 Farmington, NN 87499	onts.* 10. FIELD AND POOL, OR WILDCAT
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirement See also space 17 below.) At surface	Basin Fruitland Coal
1470' FNL, 2130' FEL	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
	14, T29N ,R9W, NMPM
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
30-045-27792 6408 GR	San Juan NM
16. Check Appropriate Box To Indicate Nature of Not	tice, Report, or Other Data

Check Appropriate Box To Indicate No	ature of Notice, Report, or Other Data
	SUBSEQUENT REPORT OF:
POLL DEALTER CASING POLL DEALTER CASING SHOOT OR ACIDIZE ABANDON*	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other)
(Other) DIST ?	(Norz: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

tompletion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OF 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.)

Drilled 12 1/4" hole to 250' KB. Ran 6 jts (239.2') of 8 5/8", 24 #, J-55, 8 rd, ST&C surface casing. Cemented casing with 150 sx (177 cf) of Class B cement containing 2% CaCl and 1/4 #/sk cellophane flakes. Circulated 6 bbls of cement to surface. Casing set at 250' KB. Shut in casing and WOC for 12 hours.

Pressure tested BOPs and surface casing to 1000 psi for 30 min. Drilled 7 7/8" hole to 3100' KB. Ran 85 jts (3118') of 5 1/2", 15.5#, K-55, 8rd, casing. Cemented casing with 300 sx of Class B lead cement containing 2% Sodium Metasilicate and 1/4 #/sk cellophane flakes. Tailed in with 150 sx of Class B containing 2% CaCl and 1/4 #/sk cellophane flakes. Displaced with 73 BW. Did not circulate cement to surface. Ran temperature survey: cement top at 600' KB. Casing landed at 3101' KB.

18. I hereby certify that the foregoing is true and correct SIGNED Suna Solution	t TITLE Engineer	DATE June 25, 1990
(This space for Federal or State office use)		ACCEPTED FOR RECORD
APPROVED BY	TITLE	FEB 0 7 1991
	See Instructions on Reverse Side	FARMINGTON RESOURCE AREA BY

RICHMOND PETROLEUM INC.

Federal 29-9-14 #2 Sec. 14, T29N, R9W San Juan County, New Mexico

SLOPE TESTS

<u>Depth</u>	<u>Hole</u> <u>Deviation</u>
260' 600' 1260' 1800' 2320' 2680'	1 Degree 1 1/2 Degrees 2 Degrees 2 Degrees 3 Degrees 4 Degrees

JAN2 4 1991

State of New Mexico OIL CON. DIV. SS County of San Juan

DANA DELYENTHAL , being first duly sworn, depose and state that the above and foregoing depth and hole deviation figures are true and correct to the best of my information and belief.

Dava Deluce tha Subscribed and sworn before me this 11th day of January, 1991

My Commission Expires (luquest 21,1994

Submit 5 Copies Appropriate District Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

000 Rio Brazos Rd., Aziec, NM 87410	REQUEST F	FOR ALLOWAR	BLE AND AUTHO L AND NATURAL	ORIZATION			
• Operator	10 18	ANSPORT OIL	LAND MATORAL	Well A	PI No.		
Richmond Petroleum I:	lC.			30-	-045-27792	2	. <u></u>
Address P.O. Drawer 2039, Fa	mington, NM	87499					
Reason(s) for Filing (Check proper box) New Well Recompletion		in Transporter of: Dry Gas Condensate	Other (Please	explain)			
Change in Operator	Cathghead Gas [
nd address of previous operator							
I. DESCRIPTION OF WELL	AND LEASE Well No	o. Pool Name, Includ	fing Formation	Kind c	of Lease	Lea	ise No.
Lease Name Federal 29-9-14	1,		itland Coal	State,	Federal or Fee	SF 07	8132
Location G	1470		North Line and	2130		East	_Line
Unit Letter	:	Feet From The	Line and	Fo	et From The		
Section 14 Townsh	29N	Range	9W , nmpm ,	San Juar	1		County
TE PROTONIATION OF TRAN	CDODTED OF	OU AND NATE	IRAL GAS				
III. DESIGNATION OF TRAN	or Con	densale R	Address (Give address				1/)
Giant Refining	· ————————————————————————————————————		P.O. Box 25				
Name of Authorized Transporter of Casir	ghead Gas	or Dry Gas		, 1V =(m 13 10 05 36)	
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge	e. Is gas actually connect YES	ted? When Nov	vember 19	90	_
If this production is commingled with that	l		gling order number:				
IV. COMPLETION DATA							hise n 1
Designate Time of Completion	Oil W	/ell Gas Well	New Well Works	over Deepen	Plug Back S	Same Res'v	Diff Res'v
Designate Type of Completion Date Spudded	Date Compl. Read	y to Prod.	Total Depth		P.B.T.D.		
			To Oli Con Pari				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	3 Formation	Top Oil/Gas Pay		Tubing Depth	!	
Perforations					Depth Casing	Shoe	
	TURIN	G CASING AN	D CEMENTING RI	CORD			
HOLE SIZE		TUBING SIZE	DEPT		S	ACKS CEM	ENT
						. 	
V. TEST DATA AND REQUI	ST FOR ALLO	WABLE		tion allowable for th	his denth or be f	or full 24 hoi	urs.)
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test	ime of load oil and m	Producing Method (I	low, pump, gas lift,	, etc.)		<u></u>
Date the trem on Ren 10 1212	Date of 100					A P 1	R2 17
Length of Test	Tubing Pressure		Casing Pressure			6 E I	
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.		CH-WCF	AD= 4	1001
					M	AR1 4	1331
GAS WELL					OIL	CON	DIA
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/M	MCF	Gravity of C	DIST_	3 .
Testing Method (pitot, back pr.)	Tubing Pressure	(Shut-in)	Casing Pressure (Sh	ut-in)	Choke Size		
VL OPERATOR CERTIF			OIL	CONSER\	VATION	DIVISI	ON
Division have been complied with a	end that the informatio	n given above			MAR 1	4 1991	
is true and complete to the best of n	ny knowledge and beli	ici.	Date Ap	proved	MAIN 1	4 1001	
Dava Dolina	uthal			1		2	/
Signature Dana Delventhal	Patr	oleum Engine	By			م	7 12
Printed Name		Title	Title	SU	PERVISOR	DISTRIC	JI 73
<u>March 6, 1991</u>	(505) 327-4404 Telephone No.	_				

- 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 5, 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.

Submi! 5 Copies
Appropriate District Office
DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

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

Santa Fe, New Mexico 87504-2088

	TOTRA	ANSPORT OIL	AND NATUR	<u>AL GAS</u>	1 377-0 4 5	NAL-		· ·
SG Interests I, Ltd.	20572				Well AF 30	045 277	92	
ddress P.O. Box 421, Blanco, N	NM 87412							
eason(s) for Filing (Check proper box) lew Well ecompletion Thange in Operator		n Transporter of: Dry Gas Condensate	Other (Ple	ase explain)				
change of operator give name and address of previous operator Ric	chmond Petro	leum Inc., P	.O. Drawer	2039, I	arming	gton, NM	87499	
. DESCRIPTION OF WELL A	ND LEASE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
case Name Federal 29-9-14 9723	Well No.		ng Formation Etland Coal	71629	Kind of State, F	Lease ederal or Fee		se Na. 3132
ocation G Unit Letter	1470	Feet From The	orth Line and	2130	Fee	t From The _	East	Line
Section 14 Township	, 29N	Range 9W	, NMPM	San .	Juan		<u> </u>	County
II. DESIGNATION OF TRANS	SPORTER OF (OIL AND NATU	RAL GAS					
Name of Authorized Transporter of Oil	or Cond		Address (Give add	ress to which	approved	copy of this fo	rm is to be se	d)
Name of Authorized Transporter of Casing F. P. C. D.	head Gas	or Dry Gas	Address (Give ada	tress to which	approved	copy of this fo	rm is to be se	ਪ)
If well produces oil of liquids, give location of tanks.	Unit Sec.	Twp. Rge.	Is gas actually con	nected?	When	?		
I this production is commingled with that I	from any other lease of		ling order number:					
Designate Type of Completion	- (X)	ell Gas Well	New Well Wo	orkover	Deepen	Plug Back	Same Res'v	Diff Ros'v
Date Spudded	Date Compl. Ready	to Prod.	Total Depth			P.B.T.D.	,	_
levations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Pay			Tubing Dept	'n	
enorations			<u> </u>			Depth Casin	g Shoe	
	TUBIN	G, CASING AND	CEMENTING	RECORD		<u> </u>		
HOLE SIZE		TUBING SIZE		PTH SET			SACKS CEM	ENT
V. TEST DATA AND REQUE	ST FOR ALLO	WABLE						
OIL WELL (Test must be after	recovery of total volu	me of load oil and mu	ist be equal to or exc	eed top allow	able for th	is depth or be	for fuil 24 ho	vs.)
Date First New Oil Run To Tank	Date of Test		Producing Metho	d (Flow, pun	φ, gas lýt,	"DE		
Length of Test	Tubing Pressure		Casing Pressure			Choke Size	ov si	91
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.			Gas- MCF		<u>.</u>
GAS WELL							12:0	
Actual Prod. Test - MCF/D	Length of Test	· · · · · · · · · · · · · · · · · · ·	Bbls. Condensate	UMMCF	at 1 to a		Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure	(Shut-in)		Croke Size		<u> </u>
VI. OPERATOR CERTIFIC I hereby certify that the rules and regularistic have been complied with an is true and complete to the best of my	ulations of the Oil Co	onservation n given above		L CON	NC	/ATION IV 5 19		ON
Latricia a.S	مافاد		. D	_		de	/	
Signature Patricia A. Sills Printed Name	· ·	Agent Tide	By Title_	SI	JPERVI	SOR DIST	RICT #	3
10/25/91 Date	(5	05) 325-5505 Telephone No.	-		 			
	100000000000000000000000000000000000000	the speciety between the 1996	and the residence to the	SALES AND SERVICE	10.00	The Sales Bally of the	CONTRACTOR STATE	1665g/mg/168g/mg/6.65.c

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
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- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, 110bbs, NM 88240

STATES OF TACKS TATCHTON Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Arlesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator SG INTERESTS I LTD	·						Well Al	PINo. -045-277	92	
ddress PO Box 338, Ignacio,	CO 8113	7								
leason(s) for Filing (Check proper box) lew W:11 lecom; letion Change in Operator		Change in	Transpor Dry Gas Condens			r <i>(Please expla</i> e of Tra		only		
change of operator give name id address of previous operator										
I. DESCRIPTION OF WELL	AND LEA	SE						<u> </u>		
rease Name FEDERAL 29-9-14		Well No.			g Formation Lland Co	al	Kind of State, F	Lease ederal or Red	SF 078	1
Location Unit Letter G	: 14	70	Feet Fro	on TheN	orth Line	2130 <u>2130</u>) Fee	t From The	East	Line
Section 14 Townsh	p 29N		Range	9W	, NA	ирм,	San Ju	ian '		County
II. DESIGNATION OF TRAI	ISPORTE			D NATUI	RAL GAS		tial annual	early of this fo	rm is to be sent)	
Name of Authorized Transporter of Oil Gary Williams Energy	Corpora	or Coade tion	nsale .	X	ì	159, Blc				
Name of Authorized Transporter of Casir	ghead Gas		or Dry	Gas X	Address (Giv	e address to wi	hich approved	copy of this fo	rm is to be sent)	
El Paso Natural Gas (Ul well produces oil or liquids,	Ompany Unit	Soc.	Twp.	Rge.	Is gas actuall	4990, Fa	rmingtor When		7499	
ive location of tanks.	<u>i i</u>		1	<u>i </u>	Ye	s	11,	/90		
This production is commingled with that V. COMPLETION DATA	from any oth	er lease or	pool, giv	e commingl	ing order num	ber:				· · · · · · · · · · · · · · · · · · ·
		Oil Wel	11 0	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff-Res'v
Designate Type of Completion	Date Com	ol Ready I	In Prod		Total Depth	<u> </u>	1	P.B.T.D.		
Date Spudded	Date Com	pi. Kemy i	io riod.					1.5.1.5.		
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing I	Formation		Top Oil/Gas	Pay		Tubing Dep	th	
Perforations		,			1.,,,			Depth Casin	ng Shoe	
					CEMENT	ING RECO			010/0 051/5	
HOLE SIZE	CA	SING & T	TUBING	SIZE	-	DEPTH SE	T	-	SACKS CEME	41
										·
V. TEST DATA AND REQU	EST FOR	ALLOV	VABLE	<u> </u>		1.			Com Call 24 hours	. 1
OIL WELL (Test must be ofte Date First New Oil Run To Tank	Dale of T		re of load	oil and mus	Producing N	Method (Flow,	nowable for in pump, gas lift,	elc.)	Jor Jul 24 Rours	VE
Length of Test	Tubing P	ressure			Casing Pres	sure		Choke Size	JAN2 619	94
Actual Prod. During Test	Oil - Bbl	Dil - Bbls.			Water - Bbl	S.		Gas- MCF		DIV
GAS WELL									OFT.	<u> </u>
Actual Prod. Test - MCF/D	Length o	l Test			Bbls. Cond	ensate/MMCF		Gravity of	Condensate	
esting Method (pitot, back pr.)	Tubing F	ressure (SI	hut-in)		Casing Pres	ssure (Shut-in)		Choke Siz	c	
VI. OPERATOR CERTIF I hereby certify that the rules and re						OIL CC	NSER	/ATION	DIVISIO	N
Division have been complied with a is true and complete to the best of a	nd that the in	formation :	given abo	eve .	Da	te Approv	ved	JAN 2	6 1994	
Marcia McC	actor	<u>/</u>			By		3	1) E	l.	
Signalüre <u>Marcia McCracken</u> Printed Name	Pro		Title		11		SUPE	AVISOR (DISTRICT	/3
1/24/94 Date	(30		3-400 Telephon		- '"	.~	··			

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Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM	APPR	OVED)
Budget Bure	cau No.	1004	-013:
Expires	March	31.19	93

San Juan, NM

5. Lease	Designation	and	Scrial	No.
SF	078132			
6. If Inc	lian, Allottee	or 7	ribe N	lame

SUNDRY NOTICES AND REPORTS ON WELLS: 10: [1
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

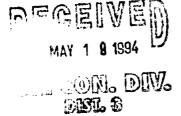
Use "APPLICATION FOR PERMIT—" for such proposals	
SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation ——
1. Type of Well Oil Well Other 2. Name of Operator	8. Well Name and No. FEDERAL 29-9-14 #1.
SG INTERESTS I, LTD 3. Address and Telephone No.	9. API Well No. 30-045-27792
PO Box 338, Ignacio, CO 81137 (303) 563-4000	10. Field and Pool, or Exploratory Area Basin Fruitland Coal
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1470' FNL, 2130' FEL Sec. 14-29N-9W	11. County or Parish, State

12.	CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA							
	TYPE OF ACTION	SION TYPE OF	TYPE OF SUBMISSION					
	New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water	Casing Repair Altering Casing						
	ng .							

13. 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.)*

The following recompletion was performed on September 11, 1993; however, a report was not sent until now.

RU Halliburton to pump a foam refrac across the Upper Fruitland Coal. Pmpd 2500 gal 12-3 mud acid. Pmp total (est) 110,000# 20-40 w/7000# 100 mesh. Total load - 1107 bbls, 1.8 MMCF Nitrogen. Open well on 1/8" choke. SIWP = 2100 psi.



14. I hereby certify that the foregoing is tree and correct Signed Marcia M Cracken	Title Product	ion Technician	ACCEPTED FOR ALCOHO
(This space for Federal or State office use) Approved by Conditions of approval, if any:	Title		FARMINGTON DISTRICT CETICE
Title 18 U.S.C. Section 1001, makes it a crime for any person kn	owingly and willfully to make to	any department or agency of the	United States