

LTR



Job separation sheet

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐

GAS
WELL ☒

OTHER ☐

2. NAME OF OPERATOR

MERIDIAN OIL INC.
El Paso Natural Gas Company

3. ADDRESS OF OPERATOR

PO Box 4289, Farmington, NM 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface 1850'N, 910'E

At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

8 miles from Gobernador, NM

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

910'

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

200'

16. NO. OF ACRES IN LEASE

Unit 2240

19. PROPOSED DEPTH

3720'

17. NO. OF ACRES ASSIGNED

TO THIS WELL 160.00

20. ROTARY OR CABLE TOOLS

Rotary

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

6850' GL

ALL OPERATIONS AUTHORIZED ARE
SUBJECT TO COMPLIANCE WITH ATTACHED

"GENERAL REQUIREMENTS"
PROPOSED CASING AND CEMENTING PROGRAM

22. APPROX. DATE WORK WILL START*

This action is subject to technical and
procedural review pursuant to 43 CFR 3165.3
and appeal pursuant to 43 CFR 3165.4.

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	AMOUNT OF CEMENT
12 1/4"	9 5/8"	32.3#	200'	130 cf. circulated
8 3/4"	7"	20.0#	3580'	1130 cf circ. surface
6 1/4"	5 1/2" liner	23.0#	3720'	do not cement

The Fruitland coal formation will be completed.

A 3000 psi WP and 6000 psi test double gate preventer equipped with
blind and pipe rams will be used for blow out prevention on this well.

This gas is dedicated.

The NE/4 of Section 35 is dedicated to this well.

RECEIVED
JUL 14 1988
OIL CON. DIV.,
DIST. 3

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, 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 [Signature] TITLE Drilling Clerk DATE 06-06-88

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY [Signature] TITLE [Signature]
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*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.

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-100
Supersedes C-130
Effective 1-4-88

All distances must be from the outer boundaries of the Section.

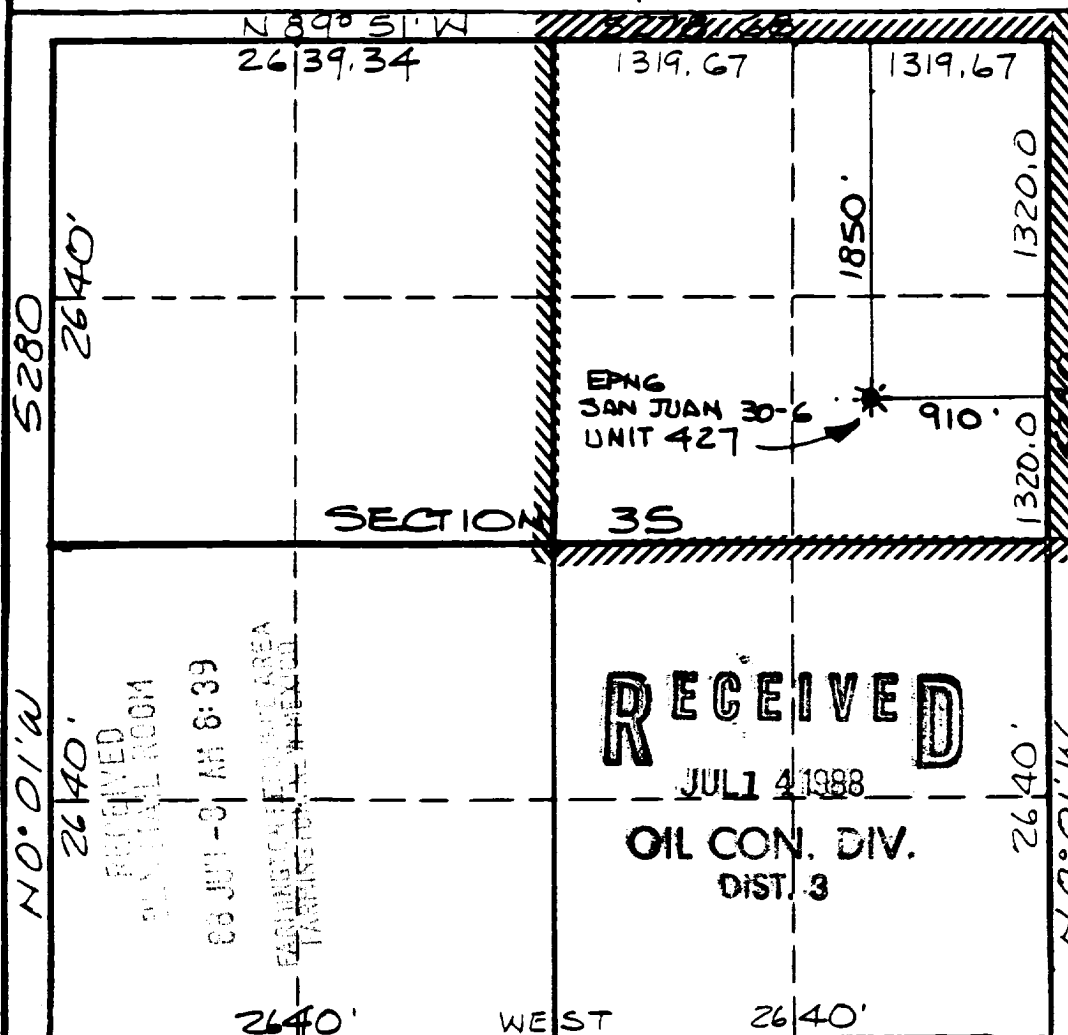
Operator MERIDIAN OIL INC. El Paso Natural Gas Company		Lease SAN JUAN 30-6 Unit(SF-079383)		Well No. 427
Unit Letter H	Section 35	Township 30 NORTH	Range 7 WEST	County RIO ARriba
Actual Footage Location of Well 1850 feet from the NORTH line and 910 feet from the EAST line				
Ground Level Elev. 6850	Producing Formation Fruitland Coal	Pool Undesignated	Dedicated Acreage 160 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure 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?

☒ Yes ☐ No If answer is "yes," type of consolidation Unitization

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 Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
Drilling Clerk
Position
El Paso Natural Gas Co.
Company
6-1-17
Date

I hereby certify that the information shown on this plat was obtained 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 knowledge and belief.

Date Surveyed
APRIL 30, 1988
Registered Professional Engineer and/or Land Surveyor

NEALE C. EDWARDS

Certificate No.
6857

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse 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 type="checkbox"/> X OTHER	7. UNIT AGREEMENT NAME San Juan 30-6 Unit
2. NAME OF OPERATOR El Paso Natural Gas Company	8. FARM OR LEASE NAME San Juan 30-6 Unit
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 87499	9. WELL NO. 427
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850'N, 910'E	10. FIELD AND POOL, OR WILDCAT Undes. Fruitland Coal
14. PERMIT NO.	11. SEC., T., R., M., OR B.L.E. AND SURVEY OR AREA Sec. 35, T-30-N, R-07-W N.M.P.M.
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6850'GL	12. COUNTY OR PARISH 13. STATE Rio Arriba NM

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) Spud Well	

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.)*

07-17-88 Spudded well at 11:15 pm 07-17-88. Drilled to 229'. Ran 5 jts. 9 5/8", 36.0#, K-55 surface casing set at 299'. Cemented with 150 sks. Class "B" with 1/4#/sk. gel-flake and 3% calcium chloride (175 cu.ft.). Circulated to surface. WOC 12 hrs. Tested 600#/30 minutes, held ok.

RECEIVED
BLM FIELD ROOM
88 JUL 18 PM 2:49
FARMINGTON REGIONAL OFFICE
FARMINGTON, NEW MEXICO

RECEIVED
JUL 22 1988
OIL CON. DIV. I
DIST 3

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Regulatory Affairs DATE 07-18-88
(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

NMOCC

*See Instructions on Reverse Side

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