

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 Coal Seam

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Box 800 Denver, Colorado 80201 ATTN: J.L. Hampton

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

At surface
1550 ~~790~~' FSL, ~~1770~~' FWL SE/SW

At proposed prod. zone
same 1690'

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

19 miles from Aztec, New Mexico

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drilg. unit line, if any) 790'

16. NO. OF ACRES IN LEASE

1201.16

18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH
see attached plan
2876 (TD)

17. NO. OF ACRES ASSIGNED
TO THIS WELL

320 S /2

20. ROTARY OR CABLE TOOLS

Rotary

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

5863 5848' GR

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

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

22. APPROX. DATE WORK WILL START*

As soon as permitted

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH
12 1/4"	9 5/8"	36#	250'
8 3/4"	7"	20#	2410'
6 1/4"	5 1/2"	15.5#	2876'

200 cf Class B (cement to surface)
675 cf Class B (cement to surface)
none

Notice of Staking was submitted: 5/11/89

Lease Description: T30N, R8W, NMPM:

Sec. 4: W/2 E/2

Sec. 5: W/2 E/2

Sec. 7: E/2 E/2

Sec. 8: E/2 W/2

Sec. 9: NW/4, W/2 NE/4, W/2 SE/4, SW/4

RECEIVED
FEB 07 1990
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.

21.

SIGNED

J. L. Hampton
J. L. Hampton

TITLE Sr. Staff Admin. Superv.

DATE

8/30/89

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

**APPROVED
AS AMENDED**

APPROVED BY

TITLE

NMOCD

FEB 02 1990

Ken Townsend

CONDITIONS OF APPROVAL, IF ANY:

FOR AREA MANAGER

*Hold C-104 FOR CANCELLATION
OF Moore Com #12
See Instructions On Reverse Side*

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

(rec'd 10/13/89
CUB)

Operator AMOCO PRODUCTION COMPANY			Lease MOORE GAS COM		Well No. # 1
Unit Letter K	Section 9	Township 30 NORTH	Range 8 WEST	County SAN JUAN	
Actual Footage Location of Well: 1550 feet from the SOUTH line and 1690 feet from the WEST line					
Ground level Elev. 5863	Producing Formation Fruitland		Pool Basin Fruitland Coal Gas		Dedicated Acreage: 320 5/8 Acres
<p>1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.</p> <p>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).</p> <p>3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No If answer is "yes" type of consolidation _____</p> <p>If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____</p> <p>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 interest, has been approved by the Division.</p>					

OPERATOR CERTIFICATION

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

Signature
J.L. Hampton/CUB
Printed Name
J.L. Hampton
Position
Sr Staff Admin. Supv.
Company
Amoco Production Company
Date
10/16/89

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 knowledge and belief.

Date Surveyed
October 3, 1989

Signature & Seal of
Professional Surveyor

Gary
Certification No.
7016



