

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 ☐

SINGLE  
ZONE ☒

MULTIPLE  
ZONE ☐

2. NAME OF OPERATOR

Tiffany Gas Company

3. ADDRESS OF OPERATOR

P.O. Drawer 3307—Farmington, N.M. 87499

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

At surface

1150' FSL & 1000' FWL

At proposed prod. zone

same

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

7 miles southeast of Shiprock, N.M.

15. DISTANCE FROM PROPOSED\*

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

16. NO. OF ACRES IN LEASE

4800

17. NO. OF ACRES ASSIGNED  
TO THIS WELL

40 joint w/NAVAJO TA #2

18. DISTANCE FROM PROPOSED LOCATION\*

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

19. PROPOSED DEPTH

743'

20. ROTARY OR CABLE TOOLS

Rotary

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

5036' GR

22. APPROX. DATE WORK WILL START\*

May 1990

23. This action is subject to technical and procedural review pursuant to 43 CFR 3165.4 AND CEMENTING PROGRAM DRILLING OPERATIONS AUTHORIZED ARE

and appeal pursuant to 43 CFR 3165.4

DRILLING OPERATIONS AUTHORIZED ARE

SUBJECT TO COMPLIANCE WITH ATTACHED

GENERAL REQUIREMENTS (3CF)

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
8 3/4"	7"	23#	45'	80sx (94.4cf)
6 1/4"	4 1/2"	10.5#	730'	

Operator plans to set 4 1/2" casing at the top of the Dakota, drill one to two feet into Dakota pay sand, and complete in open hole.

Multiple requirements are attached.

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 Jim Hicks

TITLE Agent, Tiffany Gas Company

DATE 3/09/90

(This space for Federal or State office use)

PERMIT NO. \_\_\_\_\_

APPROVAL DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

HOLD C-104 FOR WELL NAME NMOC  
CHANGE OF THE NAVAJO TA #2

\*See Instructions On Reverse Side

APPROVED  
AS AMENDED  
JUN 26 1990  
Ken Townsend  
FOR AREA MANAGER

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

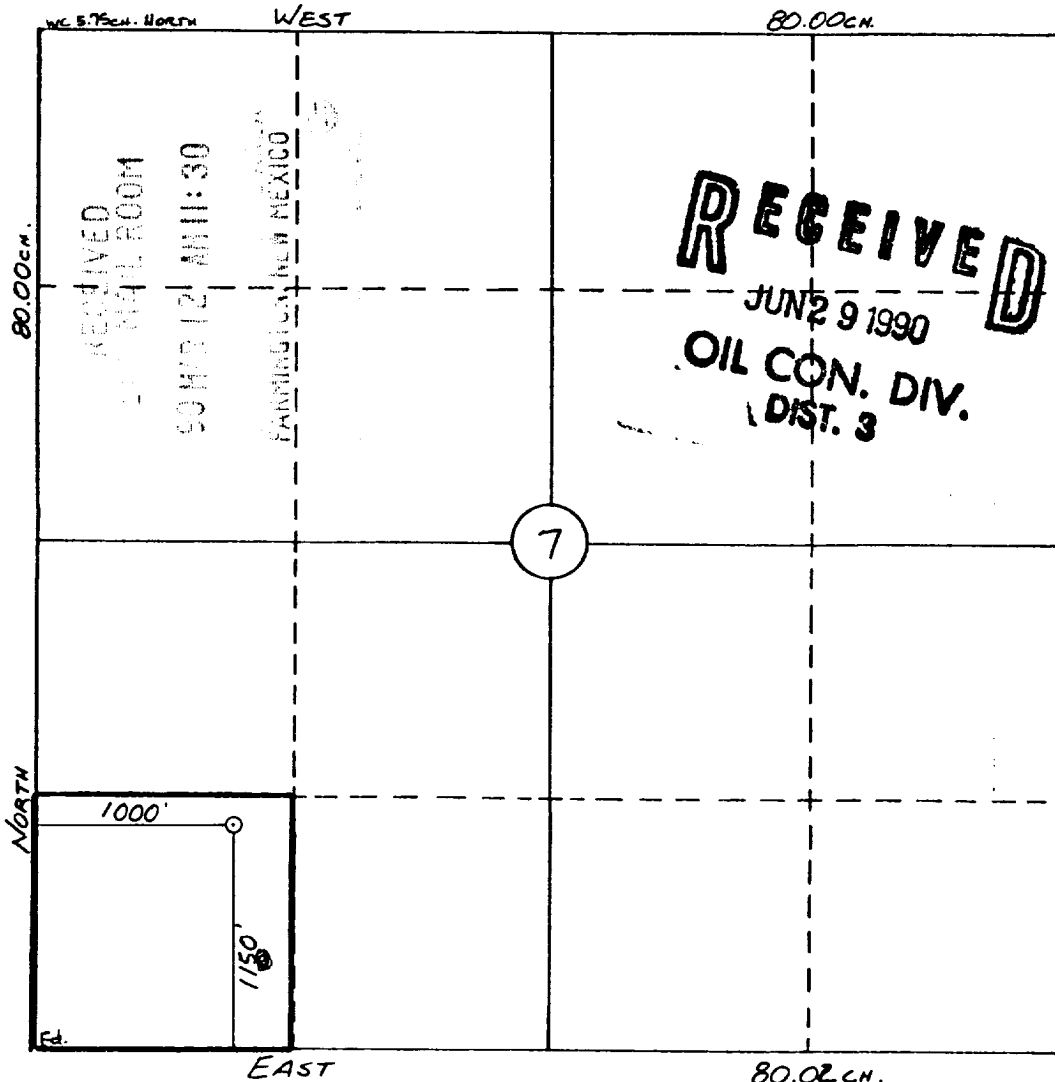
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator <b>TIFFANY GAS COMPANY</b>			Lease <b>USG SECTION 18</b>		Well No. <b>53</b>
Unit Letter <b>M</b>	Section <b>7</b>	Township <b>29 N</b>	Range <b>16 W</b>	County <b>San Juan</b>	
Actual Footage Location of Well: <b>1150</b> feet from the <b>South</b> line and <b>1000</b> feet from the <b>West</b> line					
Ground level Elev. <b>5036</b>	Producing Formation <b>Dakota</b>		Pool <b>Hogback Dakota</b>		Dedicated Acreage: <b>40</b> 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 _____ 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>					

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0



OPERATOR CERTIFICATION

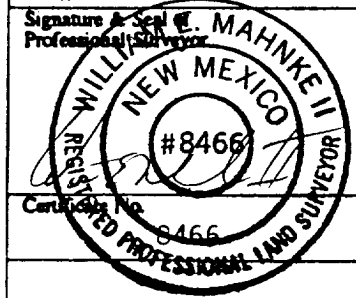
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

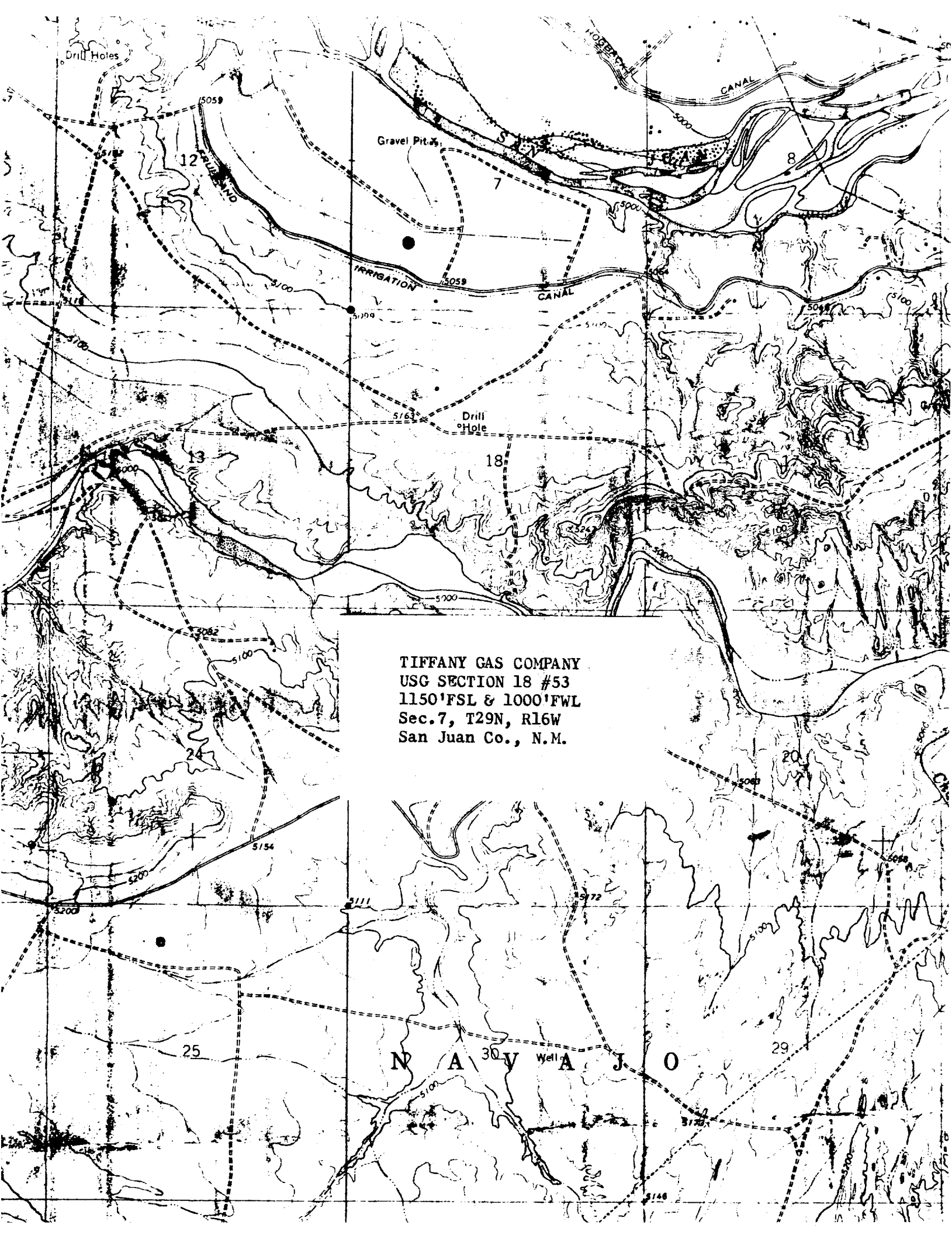
Signature *Jim Hicks*  
Printed Name **Jim Hicks**  
Position **Agent**  
Company **Tiffany Gas Company**  
Date **3/9/90**

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 **3-5-90**  
Surveyor **William E. Mahnke II**  
Signature & Seal of Professional Surveyor





TIFFANY GAS COMPANY  
USG SECTION 18 #53  
1150'FSL & 1000'FWL  
Sec.7, T29N, R16W  
San Juan Co., N.M.