## DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Budge	t Bureau No.	1004-0135
-	20	1003

## Expires: March 31, 1993

5. Lease Designation and	Serial	No
NMSF-079968		

SUNDRY NOTICES	AND	REPORTS	ON WELLS	,
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Do not use this form for proposals to drift, or to deepen or reentry to a different reservoir.

	1
Use "APPLICATION FOR PERMIT—" for such proposals	
SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation
Type of Well     Oil Well	S. Well Name and No.
2. Name of Operator  Disharden Operating Company	ROPCO 4-1
Richardson Operating Company  3. Address and Telephone No.	30-045-30366
1700 Lincoln, Suite 1700, Denver, Colorado 80203 (303) 830-8000	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, T, R, M, or Survey Description)	Twin Mounds PC
870' FNL & 1205' FEL, Section 8-T29N-R14W NMPM	11. County or Parish, State

·	<i>U</i>	San Juan Co, NM				
12. CHECK APPROPRIAT	BOX(s) TO INDICATE NATURE OF NOTICE, REP	ORT, OR OTHER DATA				
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent  X Subsequent Report  Final Abandonment Notice	F1	Change of Plans  New Construction  Non-Routine Fracturing  Water Shut-Off  Conversion to Injection  Dispose Water				
	X Other: see below	(Note: Report results of multiple completion on Well  Completion or Recompletion Report and Log form).				

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 markets and zones pertinent to this work.)\*

Well completed as per attached treatment report.



		·
14. I hereby certify but the formularly is true and correct Signed: ### WWWW	Title: Operations Manager	Date: January 21, 2002
(This space for Federal or State office use)		
Approved by:	Title:	Date:
Conditions of approvel, If any:		
	and the same of th	rency of the Linited States any false, fictitious or fraudulent

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 motier within its jurisdiction.

See Instructions on Reverse Side



MH

RICHARDSON OPERATING COMPANY

## FRACTURE TREATMENT REPORT

Operator:	RICHARDS	ON OPERA	TING C	Ο.	Well Name:	ROPCO				
Date:	6/26/0			·	-				<del></del>	<del></del>
Field:	F.C.				Location:	4-1		County:		State:
Stimulatio	n Company:	AMERICA	N ENE	RGY	Supervisor:	JOHN DU	RHAM			<u> </u>
Stage #:	2 F.C.									
Sand on Id	ocation (desig	n):		55420	Weight ticket:	55420		_Size/type:	20/40 BRADY	<b>,</b>
Fluid on lo	cation:	No. of Tar	nks:	2	Strap	: 40	Amount:	800	Usable:	760
Perforati	ons									
		Depth:	_	930-	940	-	Total Holes:	80	-	PBTD: 1089
		Shots per	foot:	4		-	EHO:	0.42		
Breakdov	ΝΠ								· <del>·············</del> ·············	<del>-</del>
		Acid	-	500		_				
		Balls.	1	N/A		-				
		Pressure:	_	550		-	Rate:	3.5 BPM	<del></del>	
Stimulati	on						·			
		ATP	-	1000		-	AIR:	34.2		
		MTP	-	1200	<del></del>	-	MIR:	34.3	<del></del>	
				_	Sand Stage	Pressure		_1	Breaker test	
					pad	- 1100				
	ISIP:				1 ppg	1100				
	5 min:	592			2 ppg	1150				
	10 min:	564			3 ppg	1100				
	15 min:	531			4 ppg	1000				
	Job Complete	e at:	13:50 h	ırs.		Date: _	6/26/01	Sta	art flow back:	N/A
	Total Fluid Pu	ımped _	458							
	Total Sand Pt	nwbea -		55420		То	ital Sand on f	ormation:	55420	
	Total Nitroger	Pumced:	_		· · ·	··				
lotes:					• •		<del>-</del>	<u>-</u>		
•	73 WELL TES	STED @ 75	MCF 2	0 TBG, 16	CSG 65 BBL	.Ş H2O				