

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Richardson Operating Company

3. Address and Telephone No.

1700 Lincoln, Suite 1700, Denver, Colorado 80203 (303) 830-8000

4. Location of Well (Footage, T, R, M, or Survey Description)

1520' FNL, 1420' FEL

Sec. 5-T29N-R14W

5. Lease Designation and Serial No.

NMSF-079968

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

ROPCO 5-4

9. API Well No.

30-045-30415

10. Field and Pool, or Exploratory Area

Twin Mounds PC

11. County or Parish, State

San Juan County, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Surface Casing/Cementing
	<input checked="" type="checkbox"/> Other: see below
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(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 that the foregoing is true and correct

Signed: Cathleen Colley Title: Land Manager

(This space for Federal or State office use)

Approved by: _____ Title: _____

Conditions of approval, if any:

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

ACCEPTED FOR RECORD

Date: 3-15-01

MAR 19 2001

FARMINGTON FIELD OFFICE

BY [Signature]

RICHARDSON OPERATING COMPANY

FRACTURE TREATMENT REPORT

Operator: Richardson Operating Company Well Name: ROPCO 5-4
 Date: 03/06/2001
 Field: Twin Mounds PC Location: 5-29N-14W County: San Juan State: NM
 Stimulation Company: American Energy Services Supervisor: John Durham
 Stage #: 1/1

Sand on location (design): 40,000 Weight ticket: 40,000 Size/type: 20/40 Brady
 Fluid on location: No. of Tanks: 2 Strap: 19' Amount: 760 bbls Usable: 760 bbls

Perforations

Depth: 802'-812' Total Holes: 40 PBTD: 901' GL
906' KB
 Shots per foot: 7 4 EHD: 0.42

Breakdown

Acid: 504 gals
 Balls: N/A
 Pressure: # 2500 Rate: 5 barrels/minute

Stimulation

ATP: # 1000 AIR: 35 bpm
 MTP: # 850 MIR: 35 bpm

	Sand Stage	Pressure	Breaker test
ISIP: <u>630#</u>	pad	1200#	11 cps
5 min: <u>590#</u>	1 ppg	1100#	break in 37 min
10 min: <u>570#</u>	2 ppg	1100#	
15 min: <u>560#</u>	3 ppg	1000#	
	4 ppg	900#	

Job Complete at: 1325 hrs. Date: 03/06/2001 Start flow back: N/A
 Total Fluid Pumped: 16,464 gals 392 bbls
 Total Sand Pumped: 40,000 Total Sand on Formation: 39,600
 Total Nitrogen Pumped: NA

Notes: