

Submit 2 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources

Revised March 25, 1999

District I 1625 N. French Dr., Hobbs, NM 87240
District II 811 South First, Artesia, NM 87210
District III 1000 Rio Brazos Rd., Aztec, NM 87410
District IV 2040 South Pacheco, Santa Fe, NM 87505

OIL CONSERVATION DIVISION

40 South Pacheco Santa Fe, NM 87505

RECEIVED MAR 23 2000

OIL CON. DIV. DIST. 3

Form with fields: WELL API NO. 30-045-29918, 5. Indicate Type of Lease STATE [X] FEE [], 6. State Oil & Gas Lease No. See attached plat, 7. Lease Name or Unit Agreement Name WF State 2, 8. Well No. No. 1, 9. Pool name or Wildcat Basin FC/Harper Hill FR Sand-PC Ext., 10. Elevation 5935' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data. NOTICE OF INTENTION TO: [] PERFORM REMEDIAL WORK, [] PLUG AND ABANDON TEMPORARILY, [] PULL OR ALTER CASING, [] OTHER: [X] CHANGE PLANS, [] MULTIPLE COMPLETION. SUBSEQUENT REPORT OF: [] REMEDIAL WORK, [] ALTERING CASING, [] COMMENCE DRILLING OPNS., [] PLUG AND ABANDONMENT, [] CASING TEST AND CEMENT JOB, [] OTHER:

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. Well location moved from Unit A (800' FNL and 915' FEL) to Unit H (1750' FNL and 790' FEL). Ground elevation changes from 5750' to 5935'. The 4 1/2" casing will be set to 1785' with 210 sacks cement to surface.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Cathleen Colby TITLE Land Manager DATE 3/7/00

Type or print name Cathleen Colby Telephone No. (303) 830-8000 (This space for State use)

APPROVED BY [Signature] SUPERVISOR DISTRICT # 3 TITLE DATE MAR 23 2000 Conditions of approval, if any:

Division I
PO Box 1000, Hobbs, NM 88241-1900
Division II
PO Drawer 60, Aramis, NM 87211-0719
Division III
1000 Rte Bryan Rd., Aztec, NM 87418
Division IV
PO Box 2000, Santa Fe, NM 87504-2000

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-103
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
Sale Lease - 4 Copies
Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

* API Number		* Post Code		* Post Name	
* Property Code		* Property Name WF State		* Well Number 2-1	
* OGRID No.		* Operator Name RICHARDSON OPERATING COMPANY		* Elevation 5936'	

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Ids	Feet from the	North/South Side	Feet from the	East/West Side	County
H	2	30 N	14 W		1750	North	790	East	San Juan

11 Bottom Hole Location if Different From Surface

UL or lot no.	Section	Township	Range	Lot Ids	Feet from the	North/South Side	Feet from the	East/West Side	County

12 Duplicated Acres **13 Acres or Infill** **14 Consolidation Code** **15 Order No.**

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16					17 OPERATOR CERTIFICATION	
					I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
					Signature _____	
					Printed Name _____	
					Date _____	
				18 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 belief.		
				Date of Survey: 29 December 1999		
				Signature _____		
				Certificate Number _____		

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MAR 23 2000

OIL CON. DIV.
DIST. 3

12 Duplicated Acres **13 Acres or Infill** **14 Consolidation Code** **15 Order No.**

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16					17 OPERATOR CERTIFICATION	
					I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
					Signature <i>Cathleen Colby</i>	
					Printed Name Cathleen Colby	
					Title Land Manager	
				18 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 belief.		
				Date of Survey _____		
				Signature and Seal of Professional Surveyor: _____		
				Certificate Number _____		

strict I
 125 N. French Dr., Hobbs, NM 88240
 strict II
 11 South First, Artesia, NM 88210
 strict III
 100 Rio Brazos Rd., Aztec, NM 87410
 strict IV
 140 South Pacheco, Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

Form C-102
 Revised October 18, 1994
 Instructions on back

Submit to appropriate District Office
 State Lease-4 Copies
 Fee Lease-3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code 71629		3 Pool Name Basin Fruitland Coal	
4 Property Code		5 Property Name WF State 2			6 Well No. #1
7 OGRID No. 019219		8 Operator Name Richardson Operating Company			9 Elevation 5935'

10 Surface Location

L or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
H	2	30N	14W		1750	North	790	East	San Juan

11 Proposed Bottom Hole Location if Different From Surface

L or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County

Dedicated Acres	13 Joint or Infill	14 Consolidation Code	15 Order No.
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10 ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR
 NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16 VA 1916	E 1545	B 11124-44
E 3149-1	B 11124-37	VA 1916
		E 3149-1

17 OPERATOR CERTIFICATION

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

Cathleen Colby

Signature
Cathleen Colby

Printed Name
Land Manager

Title
2/22/00

Date

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was given 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 belief.

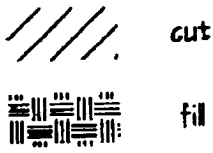
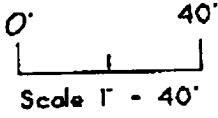
Date of Survey

Signature and Seal of Professional Surveyor:

Certificate Number

RECEIVED
 MAR 23 2000
 OIL CON. DIV.
 DIST. 2

WF State # 2 - 1
well pad and section



□ set stake & lath

