

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
MOO-C-1420-3874

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Ute Mt. Ute Tribe

7. UNIT AGREEMENT NAME

N/A

8. FARM OR LEASE NAME

UTE

9. WELL NO.

34-44

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

34-31N-14W NMPM

12. COUNTY OR PARISH

San Juan

13. STATE

NM

1.

OIL WELL ☐ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

WINTERSHALL CORPORATION

3. ADDRESS OF OPERATOR

5251 DTC Parkway, Suite 500, Englewood, CO 80111

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1090' FSL & 790' FEL (SESE)

14. PERMIT NO.

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

5,612' ungraded ground

15.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

(Other) ☒

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. 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 markers and zones pertinent to this work.)*

Wintershall requests to extend our drilling permit for another year.

RECEIVED

Bureau of Land Management

MAR 23 1987

Durango, Colorado

MAR 25 1987
OIL CON. DIV.
DIST. 3

18. I hereby certify that the foregoing is true and correct

SIGNED

William H. Howell

TITLE

Operations Manager

DATE

3/20/87

(This space for Federal or State office use)

APPROVED BY

Mark H. H.

TITLE

ACTING AREA MANAGER

DATE

MAR 23 1987

CONDITIONS OF APPROVAL, IF ANY:

NMCD

DURANGO OFFICE COPY

*See Instructions on Reverse Side

APPROVED FOR A PERIOD
NOT TO EXCEED 1 YEAR.