

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

30-045-25926

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  
Consolidated Oil & Gas, Inc.  
3. ADDRESS OF OPERATOR  
BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA  
P.O. Box 2038, Farmington, New Mexico 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)  
At surface 1110' FSL & 875' FEL (SE/SE)  
At proposed prod. zone Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE\*  
2.5 miles south of La Plata P.O.

15. DISTANCE FROM PROPOSED\* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT.  
(Also to nearest drlg. unit line, if any) 875'  
18. DISTANCE FROM PROPOSED LOCATION\* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 150'

21. ELEVATIONS (Show whether DF, RT, GR, etc.)  
5875' GR

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4"	8-5/8"	24.0#	150'	176 cu ft circ to surface
6-1/4"	4-1/2"	10.5#	2200'	To be determined after running logs

1. Drill 12-1/4" hole to + 150'. Run & set 8-5/8" csg. Circulate cement to surface.
2. Wait on cement 12 hours.
3. Install BOP. Pressure test casing & BOPs to 1000 psi.
4. Drill 6-1/4" hole to +2200' with fresh water gel mud. Run electric and radioactive logs.
5. Run and set 4-1/2" production casing & cement.
6. Selectively perforate & stimulate Fruitland formation.

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 Larry Jones TITLE Drilling Foreman DATE 2-27-84  
(This space for Federal or State office use)

PERMIT NO. \_\_\_\_\_ APPROVAL DATE \_\_\_\_\_

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED  
MAR 20 1984  
OIL CON. DIV.  
DIST. 3

APPROVED  
AS AMENDED

MAR 9 1984  
M. MILLENBACH  
AREA MANAGER

NMOCC

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

LAND CONSERVATION DIVISION  
P. O. BOX 2081  
SANTA FE, NEW MEXICO 87501

Form C-102  
Revised 10-1-

All distances must be from the outer boundaries of the Section

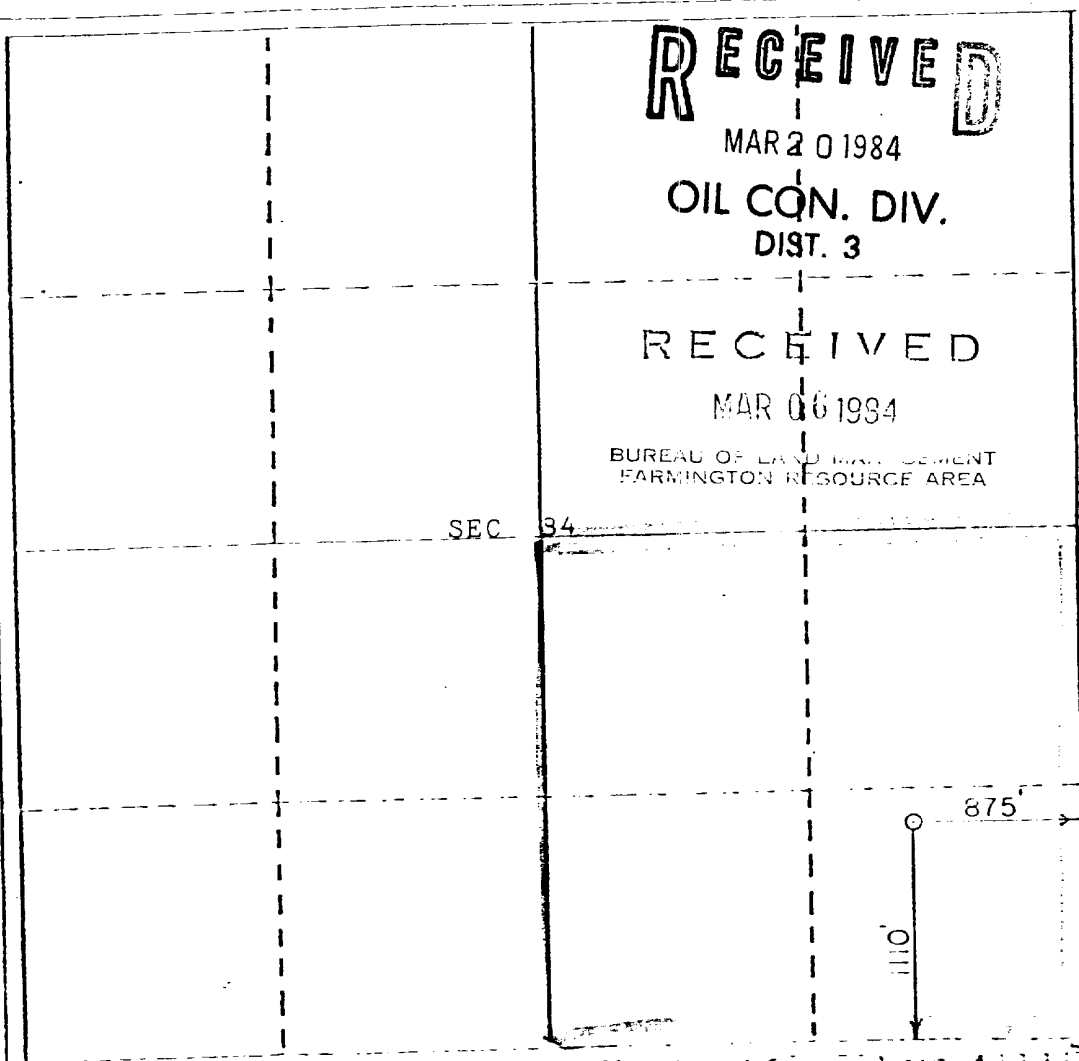
C, owner <b>Consolidated Oil and Gas</b>		Lease <b>Langendorf</b>		Well No. <b>Langendorf #2</b>
Unit Letter <b>P</b>	Section <b>34</b>	Township <b>T31N</b>	Range <b>R13W</b>	County <b>San Juan</b>
Actual Footage Location of Well:				
<b>1110</b>	feet from the <b>South</b>	line and <b>875</b>	feet from the <b>East</b>	line
Ground Level Elev. <b>5877</b>	Producing Formation <b>Fruitland</b>	Pool <b>Undesignated</b>	Dedicated Acreage: <b>160</b>	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to work interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ 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.) \_\_\_\_\_

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 interests, has been approved by the Division.



CERTIFICATION

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

*Barney L. Jones*  
Barney L. Jones

Position

Drilling Foreman

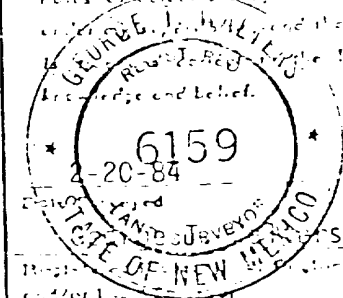
Company

Consolidated Oil & Gas

Date

2-20-84

I hereby certify that the well location shown on this plat was plotted from the notes of a survey made by me or under my supervision and that the same is true and correct to the best of my knowledge and belief.



N.M. No. 6159

Certificate No.

C-701

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0137  
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL:		OIL WELL <input type="checkbox"/>	GAS WELL <input checked="" type="checkbox"/>	DRY <input type="checkbox"/>	Other _____		
b. TYPE OF COMPLETION:		NEW WELL <input checked="" type="checkbox"/>	WORK OVER <input type="checkbox"/>	DEEP-EN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>	DIFF. RESVR. <input type="checkbox"/>	Other _____
2. NAME OF OPERATOR COLUMBUS ENERGY CORPORATION (CONSOLIDATED OIL & GAS)						7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. BOX 2038, FARMINGTON, NEW MEXICO 87401						8. FARM OR LEASE NAME LANGENDORF	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 1110' FSL & 875' FEL (SE/SE) At top prod. interval reported below Same At total depth Same						9. WELL NO. 2	
14. PERMIT NO. API 30-045-25926						12. COUNTY OR PARISH SAN JUAN	
15. DATE SPUDDED 3-22-84						13. STATE N.M.	
16. DATE T.D. REACHED 3-26-84		17. DATE COMPL. (Ready to prod.) 4-13-84		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 5875' GR-5879' KB		19. ELEV. CASINGHEAD 5875'	
20. TOTAL DEPTH, MD & TVD 2155'		21. PLUG, BACK T.D., MD & TVD 2076'		22. IF MULTIPLE COMPL., HOW MANY* --		23. INTERVALS DRILLED BY ROTARY TOOLS X CABLE TOOLS	
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 1756' - 1767' - Fruitland						25. WAS DIRECTIONAL SURVEY MADE No	
26. TYPE ELECTRIC AND OTHER LOGS RUN GR/CC1/Cmt bond logs, IES/FDC/GNL/GR						27. WAS WELL CORED No	

28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8-5/8"	24.0#	166' KB	12-1/4"	190 cf C1 B 2%CaCl <sup>2</sup>	10 bbl
4-1/2"	10.5#	2155' KB	6-1/4"	1/4# celloflake/sx 231 cf 65-35 poz w/6% gel, 1/4# cellofl/sx	8 bbl

29. LINER RECORD Tail w/144cf 50-50 poz 2%gel 1/4# celloflake/sx					
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	PACKER SET (MD)
1-1/2"				1779'	

31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
1756' - 1767' 2 SPF (17 holes)		DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
		1756' - 1767'	7000 gal Pad, 6500 gal 1 ppg 10-20 sn, 6500 gal 2 ppg 10-20 sn-flush w/ 1150 gal.

33.* PRODUCTION							
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
		Unable to test at this time. Flowing				Shut-In	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	
SIO	SIO						
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)						TEST WITNESSED BY	

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

*Ray S. Epstein*

TITLE

Production & Drilling Tech

DATE

MAR 31 1986

\*(See Instructions and Spaces for Additional Data on Reverse Side)

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.

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):	38. GEOLOGIC MARKERS				
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP MEAS. DEPTH TRUE VERT. DEPTH
				OJO ALAMO FRUITLAND PIC. CLIFFS T.D.	1284' 1496' 2137' 2155'  Same Same Same

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. SF 078463	
2. NAME OF OPERATOR COLUMBUS ENERGY CORPORATION (CONSOLIDATED OIL & GAS)		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P.O. BOX 2038, FARMINGTON, NEW MEXICO 87499		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1110' FSL & 875' FEL (SE/SE)		8. FARM OR LEASE NAME LANGENDORF	
14. PERMIT NO. API #30-045-25926		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5875' GR - 5879' KB		10. FIELD AND POOL, OR WILDCAT UNDES. FRUITLAND	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC. 34, T31N, R13W	
		12. COUNTY OR PARISH SAN JUAN	
		13. STATE N.M.	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) <input type="checkbox"/>		Current Status of Well <input checked="" type="checkbox"/>	
(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.)*			

This well is not connected to a pipeline. We have our Williams 2, a well in this same area, on a pump jack and we are currently evaluating the results. We are unable to conduct any tests due to lack of production.

RECEIVED

MAR 05 1986

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

MAR 07 1986

OIL CON. DIV.]  
DIST. 3

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

SIGNED

*Ray S. Chilton*

TITLE

Prod & Drl'g Tech.

DATE

3-3-86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOCC

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

NO. OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Columbus Energy Corporation	
P.O. BOX 2038, FARMINGTON, NEW MEXICO 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Condensate Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
Per Order R8769 Change of Pool Designation 21. Flow to 1384 Gals.	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name LANGENDORF	Well No. 2	Pool Name, including Formation Wildcat Fruitland Sand	Kind of Lease State, Federal or Fee	Lease No. Federal
Location Unit Letter <u>P</u> : <u>1110</u> Feet From The <u>South</u> Line and <u>875</u> Feet From The <u>East</u> Line of Section <u>34</u> Township <u>31N</u> Range <u>13W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Not Connected to a Pipeline	
Name of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

*[Signature]*  
(Signature)  
Prod. & Drl'g. Tech.  
(Title)  
April 24, 1989  
(Date)

OIL CONSERVATION DIVISION  
APR 26 1989  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY *[Signature]*  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowance on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Columbus Energy Corp. <i>Quinoco Petroleum, Inc.</i>	8. FARM OR LEASE NAME Langendorf
3. ADDRESS OF OPERATOR P. O. Box 2038, Farmington, NM 87499	9. WELL NO. 2
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  1110' FSL & 875' FEL (SE/SE)	10. FIELD AND POOL, OR WILDCAT <i>U.S. FRY SAND</i> Unders. Fruitland
14. PERMIT NO. API #30-045-25926	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34-T31N-R13W
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5875' GR - 5879' KB	12. COUNTY OR PARISH San Juan
	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Change of Operator</u> <input checked="" type="checkbox"/>	

(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.) \*

Change operator from Columbus Energy Corp. to Quinoco Petroleum, Inc., 4582 South Ulster Street Parkway, Suite 1700, Denver, CO 80237.

Quinoco's federal bond number is: 05-83-23

RECEIVED  
OIL CON. DIV.  
DIST. 3

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

SIGNED *J. Stewart* TITLE Operations Manager DATE 11/30/89

(This space for Federal or State office use)

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

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

ACCEPTED FOR RECORD  
DATE

JAN 09 1990

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. SF 078463
2. NAME OF OPERATOR Consolidated Oil & Gas, Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 2038, Farmington, New Mexico 87499	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1110' FSL & 875' FSL (SE/SE)	8. FARM OR LEASE NAME Langendorf
	9. WELL NO. 2
	10. FIELD AND POOL, OR WILDCAT Undes. Fruitland
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 34, T31N, R13W
14. PERMIT NO. API# 30-045-25926	12. COUNTY OR PARISH San Juan
15. ELEVATIONS (Show elevation of resource area) 5875' GR, 5879' KB	13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
(Other) ☐

PULL OR ALTER CASING ☐  
MULTIPLE COMPLETION ☐  
ABANDON\* ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☐  
(Other) ☐

REPAIRING WELL ☐  
ALTERING CASING ☐  
ABANDONMENT\* ☐

(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.)\*

- 3-22-84 Spud 12-1/4" surface hole @ 9:30 AM & drilled to 166'. Ran 4 jts 8-5/8", 24#, STC casing, shoe & insert float, & set @ 166'KB. Cemented w/ 190 cu ft Cl"B" w/ 2% CaCl<sub>2</sub> & 1/4# celloflake/sk. Circulate out 10 bbl to surface. Plug down at 5:30 PM.
- 3-23-84 WOC 12 hours. Pressure test to 1000 psi, OK. Started drilling 6-1/4" hole.
- 3-26-84 Drilled to TD (2155') @ 12:30 PM. Ran IES, FDC, & CNL & GR logs to TD. Ran 4-1/2", 10.5#, J-55, STC casing, 53 jts set at 2155'KB. Float collar at 2113'. Cemented w/ 231 cu ft 65-35 poz w/ 6% gel & 1/4# celloflake/sk. Tailed in w/ 144 cu ft 50-50 poz w/ 2% gel & 1/4# celloflake/sk. Plug down @ 6:20 AM. Circ out 8 bbl cmt to surface. Rig released at 6:30 AM.

RECEIVED

APR 02 1984

OIL CON. DIV.  
DIST. 3

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

SIGNED Barbara C. Rex

TITLE Prod. & Drlg. Technician

DATE March 27, 1984

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

NM/CCG

MAR 30 1984

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

BY SMN



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.

SF 078463

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Langendorf

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

W.C. Fruitland

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

Sec 34, T31N, R13W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

CONSOLIDATED OIL & GAS, INC.

3. ADDRESS OF OPERATOR

P.O. Box 2038, Farmington, NM 87499

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

At surface

1110' FSL & 875' FEL (SE/SE)

14. PERMIT NO.

API #30-045-25926

15. ELEVATIONS (Show whether SP, ES, GR, etc.)

5875' GR, 5379' KB

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) "completion operations"

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

- 4-12-84 MIRUSU, install BOP, Pr test, OK. Ran GR/CCL/Cmt bond logs. Pr test to 2500 psi, OK. Found PBTD @ 2076'. Perf 1756-67' 2SPF (17 holes). Break down perfs @ 3000 psi. Frac as follows: 7000 gal pad, 6500 gal 1 PPG 10-20 sand, 6500 gal 2 PPG 10-20 sand, flush w/ 1150 gal. ISIP 1380, 15 min 1230. 70% quality foam on all fluid. Total fluid to recover 21,150 gal.
- 4-13-84 Cleaned up. Ran 56 jts 1-1/2" EUE, 10rd, 2.3# tbgs set @ 1779'. Removed BOP, installed wellhead. Rig up to swab, swabbed. Riggged down & rig released.

RECEIVED  
AUG 29 1984  
OIL CON. DIV.  
DIST. 3

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

SIGNED

Barbara Williams

TITLE Engineering Ass't

DATE 8-10-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

AUG 28 1984

\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

RY

Jmm

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL OR CONCRETE OPERATOR	
DISTRIBUTION	
SANTA FE	
FILE	
W.L.S.A.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
OPERATION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2038  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Formal 08-01-83  
Page 1

NOV 22 1985

OIL CON. DIV.  
DIST. 3

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Columbus Energy Corporation (Formerly Consolidated Oil & Gas, Inc.)	
Address P.O. Box 2038, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well	CHANGE OF COMPANY NAME
<input type="checkbox"/> Recompletion	
<input type="checkbox"/> Change in Ownership	
<input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Commingled Gas <input type="checkbox"/> Condensate	

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name LANGENDORF 2	Well No.	Pool Name, including Formation Undes. Fruitland Flora Vista Gallup	Kind of Lease State, Federal or Fee	Lease No. Federal
Location P 1110 South 875 East	Unit Letter 34	Foot From The 31N	Line and 13W	Foot From The San Juan
Line of Section	Township	Range	N.M.P.M.	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent.) P.O. Box 256, Farmington, NM 87499
Name of Authorized Transporter of Commingled Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent.)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rgn. P 34 31N 13W
Is gas actually connected?	When No.

If this production is commingled with that from any other lease or pool, give commingling order number \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

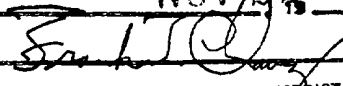
VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

  
(Signature)  
Engineering Technician  
(Title)  
10/21/85  
(Date)

OIL CONSERVATION DIVISION

NOV 22 1985

APPROVED \_\_\_\_\_  
BY   
TITLE \_\_\_\_\_ SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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

RECEIVED  
MAY 21 1993

OIL CON. DIV. I  
DIST. 3

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other Shut-in well

2. Name of Operator  
Hallwood Petroleum, Inc.

3. Address and Telephone No.  
P. O. Box 378111, Denver, Colorado 80237

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
SE/4 SE/4 1110' FSL & 875' FEL  
Section 34 - T31N - R13W

5. Lease Designation and Serial No.  
NMSF078463

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
Langendorf 2

9. API Well No.  
30-045-25926

10. Field and Pool, or Exploratory Area  
Unders. Fruitland Sand

11. County or Parish, State  
San Juan, 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 checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Well Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<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 markers and zones pertinent to this work.)\*

Hallwood Petroleum, Inc. plugged and abandoned the above mentioned well as follows:

5/7/93 - FIRST REPORT. Road Rig to location. Circ. hole, mix plug mud 8.4 ppg, 40 vis, circ hole w/ plug mud. Change out pipe rams in BOP.

5/8/93 - NU BOP, change out rams to 1½", LD 56 jts, 1½" tbg, change rams to 2 3/8". PU Mtn States 4½" CIBP. TIH w/ 53 jts 2-3/8", set @ 1,668', circ hole w/ plug mud (8.4 ppg & 40 Vis), mix cmt w/ Western Co., spot 25 sxs class "B" cmt @ 156 ppg from 1,660-1,446'. POOH LD 40 jts 2-3/8", circ hole, mix & pump 68 sxs class "B" cmt @ 15.6 ppg from 418' to surface, circ 2 bbls cmt, RD Western. POOH LD 13 jts 2-3/8". RD & ND BOP. Rig released @ 15:30 hrs 4/7/93. Wellbore is plugged.  
NOTE: Belva Christensen (BLM) witnessed plugging.

5/10/93 - Cut off casing strings and set dryhole marker.

Approved as to plugging of the well.  
Liability under bond is retained until  
surface restoration is completed.

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

Signed Kevin O'Connell Title Drlg. & Production Supervisor Date 5/11/93

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any:

APPROVED

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.

\*See Instruction on Reverse Side  
NMOcn

DISTRICT MANAGER



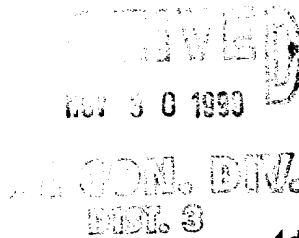
**NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

November 23, 1999

**Greystone Energy, Inc.**  
9155 E. Nichols Ave. - Suite 350  
Englewood, Colorado 80112  
Attention: Brian D. Voigt

Telefax No. (303) 925-0543



**Administrative Order NSL-4380**

Dear Mr. Voigt:

Reference is made to the following: (i) your application dated November 1, 1999 for an exception to Rule 7 of the "*Special Rules and Regulations for the Basin-Fruitland Coal Gas Pool*," as promulgated by New Mexico Oil Conservation Division ("Division") Order No. R-8768, as amended; and (ii) the records of the Division in Santa Fe: all concerning Greystone Energy, Inc.'s ("Greystone") request for authorization to reenter the plugged and abandoned Hallwood Petroleum, Inc. Langendorf Well No. 2 (API No. 30-045-25926), located 1110 feet from the South line and 875 feet from the East line (Unit P) of Section 34, Township 31 North, Range 13 West, NMPM, San Juan County, New Mexico.

This well, to be redesignated the McLintock Well No. 1 by Greystone, was originally drilled to a total depth of 2,155 feet in 1984 and completed in the Fruitland Sand interval. This well never produced commercial volumes of gas and in 1993 was finally plugged and abandoned.

It is our understanding that Greystone now intends to reenter this well and attempt a completion in the Basin-Fruitland Coal (Gas) Pool within a standard 320-acre stand-up gas spacing and proration unit comprising the E/2 of Section 34.

By the authority granted me under the provisions of Rule 8 of these special coal gas pool rules, the above-described off-pattern non-standard coal gas well location for this well is hereby approved.

Sincerely,

Lori Wrotenbery  
Director

LW/MES/kv

cc: New Mexico Oil Conservation Division - Aztec ✓  
U. S. Bureau of Land Management - Farmington



GREYSTONE ENERGY, INC.

9155 E. Nichols Ave., Suite 350 • Englewood, CO 80112

Bus: 303-925-0542 • Fax: 303-925-0543

November 1st, 1999

Ms. Lori Wrotenberry  
New Mexico Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505

RECEIVED  
NOV - 3 1999  
OIL CON. DIV.  
DIST. 3

RE: Administrative Approval for Unorthodox Location  
Greystone Energy, Inc.  
(Langendorf # 2 Re-Entry) – to be re-named the Mc Lintock #1 Fruitland Coal  
1110' FSL, 875' FEL, Sec.34, T31N, R13W, N.M.P.M.  
San Juan County, New Mexico

Dear Ms. Wrotenberry:

Greystone Energy, Inc. requests administrative approval of an unorthodox location pursuant to Rule 104 . F (2). Standard spacing for the Basin Fruitland Coal states that the first well in a section must be located in either the NE/4 or the SW/4. The well bore, which Greystone plans on utilizing, is in the SE/4. (See attached C-102 Plat) Greystone Energy would like to re-enter this plugged well to test the Basin Fruitland Coal in this area. There is no offset Fruitland Coal production in this area.

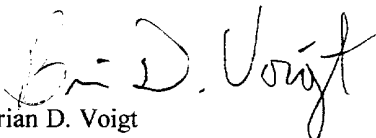
To comply with the New Mexico Oil Conservation Rules, Greystone Energy, Inc. is submitting the following data for support:

1. Form C-102 – showing plugged well position
2. Location Plat showing Offset lease hold and well spot
3. Offset operator / lease holder notification list

In accordance to New Mexico Oil Conservation Division Rule 104. F (3), all offset operators / leaseholders have been notified of this application by certified mail. As an offset operator / leaseholder, if you have an objection to this application you must file your objection in writing with the Division within 20 days from the date that the Division receives this application.

If additional information is needed, please contact me at (303) 925-0542 Ext. 223.

Sincerely,

  
Brian D. Voigt  
Vice President

CC: NMOCD-Aztec, BLM – Farmington, Offset Operators / Lease Holders

## CONSERVATION DIVISION

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENTP.O. BOX 7081  
SANTA FE, NEW MEXICO 87501Form E-123  
Revised 10-81

All distances must be from the corner nearest the Section

Owner <b>Consolidated Oil and Gas</b>			Lease <b>Langendorf</b>		Well No. <b>Langendorf #2</b>
Unit Letter <b>P</b>	Section <b>34</b>	Township <b>T31N</b>	Range <b>R13W</b>	County <b>San Juan</b>	
Actual Footage Location of Wells:					
1110 feet from the <b>South</b>		line and <b>875</b> feet from the <b>East</b>		line	
Ground Level Elev. <b>5877</b>	Producing Formation <b>Fruitland</b>	Pool <b>Undesignated</b>		Dedicated Acres: <b>160</b>	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to well interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communization, unitization, force-pooling, etc?

☐ Yes ☐ 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.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communization, unitization, force-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.

		<b>RECEIVED</b> MAR 20 1984 OIL CON. DIV. DIST. 3	
		<b>RECEIVED</b> MAR 06 1984 BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA	
SEC 34			

## CERTIFICATION

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

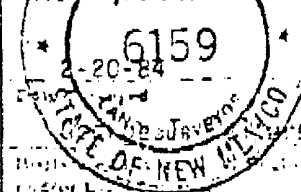
*Barney L. Jones*  
Barney L. Jones

Position  
Drilling Foreman

Company  
Consolidated Oil & Gas

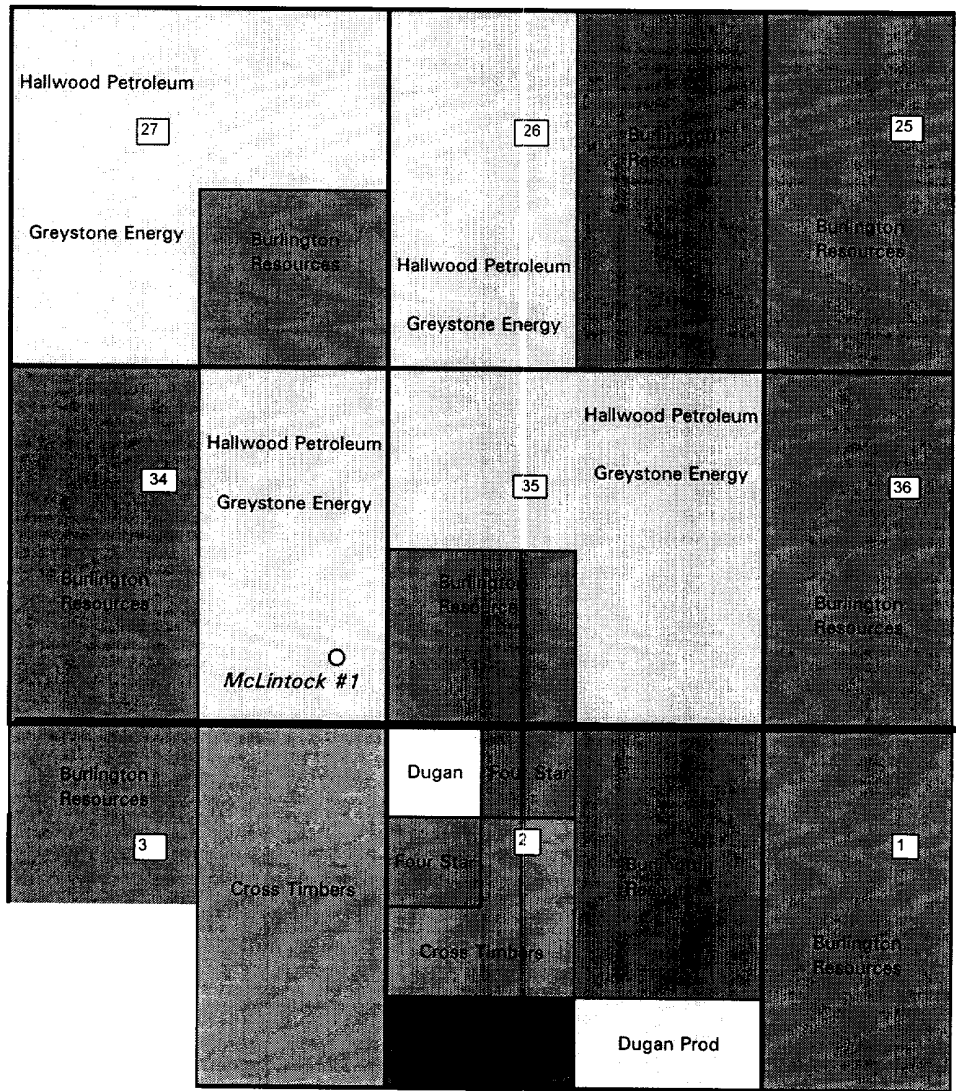
Date  
2-20-84

I hereby certify that the well has  
been placed on this plat as planned and  
that the information is true and correct to  
the best of my knowledge and belief.



N.M. No. 6159  
Certification No. C-701

# McLintock #1 - Offset Operators and Owners



31 N. - 13 W.

30 N. - 13 W.

## Offset Operator / Leaseholder List

McIntock #1 Fruitland Coal  
3P-31N-13W  
(Formerly the Langendorf 2 Frt. Snd)

Operator	Reservoir	Township	Range	Section	
DUGAN PRODUCTION CORP P.O. Box 420 Farmington, NM 87499-0420	Fruitland Coal	30 N	13 W	2	NW/4 of NW/4
BURLINGTON RES O&G CO P.O. Box 4289 Farmington, NM 87499	Fruitland Coal	31 N	13 W	27	SE/4
				34	W/2
				35	SW/4
		30 N	13 W	3	NW/4
Greystone Energy, Inc. 9155 East Nichols Ave, #350 Englewood, Colorado 80112	Fruitland Coal	31 N	13 W	26	W/2
				27	All excluding SE/4
				34	E/2
				35	NW/4
HALLWOOD PETROLEUM INC. 4610 SOUTH ULSTER STREET, SUITE 200 DENVER, CO 80237	Fruitland Coal	31 N	13 W	26	W/2
				27	All excluding SE/4
				34	E/2
				35	NW/4
Four Star Oil & Gas Co. P.O. Box 2100 Denver, Colorado 80201	Fruitland Coal	30 N	13 W	2	NE/4 of NW/4 SW/4 of NW/4
Cross Timbers Oil Co. 810 Houston St, #2000 Ft Worth, Texas 76102	Fruitland Coal	30 N	13 W	2	SE/4 of NW/4 N/2 of SW/4
				3	E/2
Unocal Corporation P. O. Box 4551 Sugarland, Texas 77210	Fruitland Coal	30 N	13 W	2	S/2 of SW/4
W A Moncrief 9th & Commerce Ft Worth, Texas 76102	Fruitland Coal	30 N	13 W	2	S/2 of SW/4



Submit 5 Copies  
Appropriate District Office  
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

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED

Form C-104  
Revised 1-1-89  
See instructions  
at Bottom of Page

JUL 16 '90

O. C. D.

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Hallwood Petroleum, Inc.	Well API No. 30-045-25926
Address P.O. Box 378111, Denver, CO 80237	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain) New Well <input type="checkbox"/> Change in Transporter of: Company name changed from Quinoco Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Petroleum, Inc. effective 6/1/90 Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> <i>Operator Change only</i>	
If change of operator give name and address of previous operator Quinoco Petroleum, Inc., P.O. Box 378111, Denver, CO 80237	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Langendorf	Well No. 2	Pool Name, including Formation Undes. Fruitland Sand	Kind of Lease State (Federal) or Fee	Lease No. SF078463
Location Unit Letter <i>J P</i> : 1110 Feet From The South Line and 875 Feet From The East Line Section 34 Township 31N Range 13W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?

If this production is commingled with that from any other lease or pool, give commingling order number.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed 100 allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

*Holly S. Richardson*  
Signature  
Holly S. Richardson Sr. Ops. Eng. Tech.  
Printed Name  
6/26/90 (303) 850-6322  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 10 1990

By *[Signature]*  
Title SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR Consolidated Oil & Gas, Inc.		8. FARM OR LEASE NAME LANGENDORF	
3. ADDRESS OF OPERATOR PO Box 2038, Farmington, NM 87499		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1110' FSL & 875' FEL (SE/SE)		10. FIELD AND POOL, OR WILDCAT Undes. Fruitland	
14. PERMIT NO. API #30-045-25926		15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5875'GR, 5879'KB	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 34, T31N, R13W		12. COUNTY OR PARISH San Juan	
13. STATE NM			

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) "Current Status" <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>			

(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.) \*

This well has been shut in since 4-17-84 and temporarily abandoned pending further evaluation.

RECEIVED  
MAR 26 1985  
OIL CON. DIV.  
DIST-3

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

SIGNED Barbara E. Rex TITLE Engineering Technician DATE 3-15-85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

\*See Instructions on Reverse Side

NMOCC

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side.)

Form approved:  
Budget Bureau No. 1004-0.3  
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NMSF078463

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER Shut-in well

2. NAME OF OPERATOR  
Hallwood Petroleum, Inc.

3. ADDRESS OF OPERATOR  
P. O. Box 378111, Denver, Colorado 80237

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

1110' FSL & 875' FEL (SE/4 SE/4)

14. PERMIT NO.  
API# 30-045-25926

15. ELEVATIONS (Show whether DF, RT, OR, etc.)  
5879' KB, 5875' GL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Langendorf

9. WELL NO.  
2

10. FIELD AND POOL OR WILDCAT

Undes. Fruitland  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 34-T31N-R13W

12. COUNTY OR PARISH  
San Juan

13. STATE  
NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANT

XX

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

Hallwood Petroleum, Inc. intends to permanently abandon the subject well as follows:

1. MIRUSU, circulate hole with plug mud and TOH with 1 1/2" tubing.
2. Run a 4 1/2" gauge ring to 1725'.
3. Set a 4 1/2" CIBP at 1660' and cap with cement from 1660' to 1446'. This plug would be above the Fruitland perforations (1756-1767').
4. Pump cement inside 4 1/2" casing from 375' back to surface.  
Note: 8 5/8" surface csg. shoe is at 166'.
5. Cut 4 1/2" csg. 4 feet below ground level, weld on cap, install dry hole marker and restore location.

NOTE: Anticipated start date is June 1, 1993.

RECEIVED  
APR 2 1993  
OIL CON. DIV  
DIST. 3

RECEIVED  
BLM  
MAR 22 PM 1:17  
707 FORT WORTH, NM

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

SIGNED Kevin O'Connell

TITLE Drlg. & Prod. Supervisor

DATE 3/17/93

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

DATE

MAR 29 1993

DISTRICT MANAGER

\*See Instructions on Reverse Side