Form 9-331 C
(May 1963)

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1425.

30-031-20842

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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: [illegible] Oil Corporation see attachment

3. ADDRESS OF OPERATOR: 7 W Seventeenth St., Suite 2660, Denver, CO 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)
At surface: 990' FSL & 330' FWL (SW SW)
At proposed prod. zone: Same

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14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*: [illegible] miles Southeast of Star Lake Compressor Station

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any): 330'

16. NO. OF ACRES IN LEASE: 320

17. NO. OF ACRES ASSIGNED TO THIS WELL: 40

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.: 1200'

19. PROPOSED DEPTH: 2200'

20. ROTARY OR CABLE TOOLS: Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.): 6560' GR

DRILLING OPERATIONS AUTHORIZED ARE SUBJECT TO COMPLIANCE WITH ATTACHED "GENERAL REQUIREMENTS"

22. APPROX. DATE WORK WILL START*: April 1, 1983

This action is subject to administrative appeal pursuant to 30 CFR 290.

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
[illegible] 3/4"	8 5/8"	24# J-55	90'	10 sxs Class C
7 7/8"	4½"	9.5# J-55	2200'	200 sxs Class C w/2% CaCl

1. Drill 10 3/4" hole and set 8 5/8" surface casing to 90' w/cement to surface
2. W.O.C. - Test surface casing w/mud pump
3. Drill 7 7/8" hole to approximately 2200' using gel and water
4. Plan to use mud logging unit during drilling. Run DST as warranted and logs at T.D. as warranted.
5. Set 4½" and cement to surface if warranted.
6. Run logs, perforate, and stimulate as needed.

Estimated tops: Surface Formation--Lewis Shale
Chacra--972'
Cliff House--1078'
Menefee--1132'
Point Lookout--2053'

Estimated Depth of Anticipated Oil or Gas: 1950'
See attached diagram for pressure control equipment
Duration of Operations: 10 days

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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: James K. Tuck TITLE: Consultant-Rep DATE: 2-23-83

(This space for Federal or State office use)

APPROVED
AS AMENDED
MAR 15 1983
JAMES F. SIMS
DISTRICT ENGINEER

PERMIT NO. ____ APPROVAL DATE ____

APPROVED BY ____ TITLE ____ DATE ____

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

OIL CONSERVATION DIVISION

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-102
Revised 10-1-78

All distances must be from the outer boundaries of the Section.

Operator	Lease	Well No.
COLORADO INTERSTATE GAS COMPANY	BIRD-FEDERAL	12

Unit Letter	Section	Township	Range	County
	32	32N	5W	McKinley

Actual Footage Location:
990 feet from the South line and 990 feet from the West line

Ground Level Elev.	Producing Formation	Pool	Dedicated Acreage:
6		Gavilan	Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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 working 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, force-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Division.

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CERTIFICATION

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

Name: James K. Volk

Position: Operations Representative

Company: Mtn. Oil Corporation

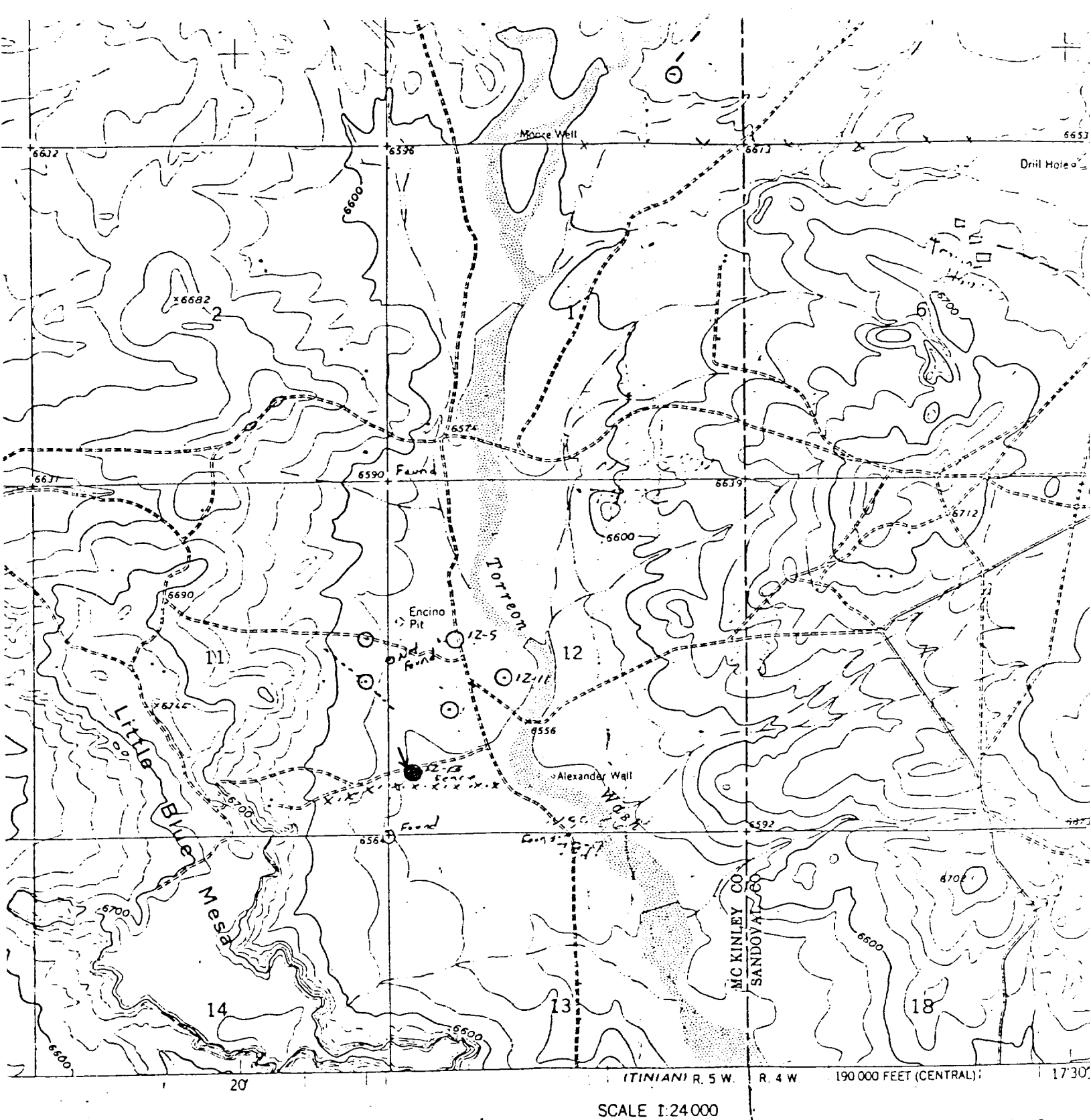
Date: February 24, 1983

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 knowledge and belief.

Date Surveyed: February 22, 1983

Registered Professional Engineer and/or Land Surveyor

Certificate No.



SCALE 1:24000

1 0 1 MILE

1000 0 1000 2000 3000 4000 5000 6000 7000 FEET

1 5 0 1 KILOMETER

CONTOUR INTERVAL 20 FEET

DOTTED LINES REPRESENT 10-FOOT CONTOURS

DATUM IS MEAN SEA LEVEL

13½°

TRUE NORTH

MAGNETIC NORTH

APPROXIMATE MEAN DECLINATION, 1961

Vicinity Map for

BIRD OIL CORPORATION #12-13 BIRD-FEDERAL

990'FSL 330'FWL Sec. 12-T19N-R5W

McKINLEY COUNTY, NEW MEXICO

HINGTON 25, D. C.

WEST

Form 9-331
Dec. 1973

Form Approved.
Budget Bureau No. 42-R1424

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil well [X] gas well [ ] other

2. NAME OF OPERATOR
Bird Oil Corp. c/o Bayless Drilling Co.

3. ADDRESS OF OPERATOR
P.O. Box 2669, Farmington, NM 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)
AT SURFACE: 990' FSL & 330' FWL
AT TOP PROD. INTERVAL: same
AT TOTAL DEPTH: same

5. LEASE
NM 17184

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Bird Federal

9. WELL NO.
~~12~~ 13

10. FIELD OR WILDCAT NAME
~~Wildcat~~ Mesaverde

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 12, T19N, R5W

12. COUNTY OR PARISH: McKinley
13. STATE: New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF	[ ]	[ ]
FRACTURE TREAT	[ ]	[ ]
SHOOT OR ACIDIZE	[ ]	[ ]
REPAIR WELL	[ ]	[ ]
PULL OR ALTER CASING	[ ]	[ ]
MULTIPLE COMPLETE	[ ]	[ ]
CHANGE ZONES	[ ]	[ ]
ABANDON*	[ ]	[ ]
(other)		

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

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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.)*

TO CHANGE OPERATOR'S REPRESENTATIVE.

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Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

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

SIGNED [signature] TITLE Agent DATE 3-10-83

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED
AS AMENDED
MAR 1 7 1983
JAMES F. SIMS
DISTRICT ENGINEER

*See Instructions on Reverse Side

NMOCC