

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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
El Paso Natural Gas Company
3. ADDRESS OF OPERATOR
PO Box 4289, Farmington, NM 87409
4. LOCATION OF WELL (Report location clearly and in accordance with attached requirements)
At surface 1850'S, 1190'E
At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE
11 miles NE of Counselors, NM
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any) 1190'
16. NO. OF ACRES IN LEASE 2558.28
17. NO. OF ACRES ASSIGNED TO THIS WELL \$ 320.00
18. DISTANCE FROM PROPOSED* LOCATION TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
19. PROPOSED DEPTH 7200'
20. ROTARY OR CABLE TOOLS Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.) 6633' GL
DRILLING OPERATIONS AUTHORIZED ARE SUBJECT TO COMPLIANCE WITH ATTACHED "GENERAL REQUIREMENTS" PROPOSED CASING AND CEMENTING PROGRAM
22. APPROX. DATE WORK WILL START* This action is subject to technical and procedural review pursuant to 43 CFR 3165.3 and appeal pursuant to 43 CFR 3165.4.

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4"	9 5/8"	36.0#	200'	130 cu.ft. circulated
7 7/8"	4 1/2"	10.5#	7200'	1147-cu.ft. 3 stages

1st stage - 418 cu.ft. to cover Gallup
2nd stage - 405 cu.ft. to cover Mesa Verde
3rd stage - 324 cu.ft. to cover Ojo Alamo

Selectively perforate and sand water fracture the Dakota formation.

A 3000 psi WP and 6000 psi test double gate preventer equipped with blind and pipe rams will be used for blow out prevention on this well.

This gas is dedicated.

The ^{S/P}W₁₂ of Section ²⁹28 is dedicated to this well

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 *Peggy Cook* Drilling Clerk DATE 10-21-85

(This space for Federal or State office use)

PERMIT NO. APPROVAL DATE

APPROVED BY CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
DEC 17 1985
OIL CON. DIV.
DIST. 3 NMOCC

APPROVED
AS AMENDED

DEC 11 1985
/s/ J. Stan McKee

M. MILLENBACH
AREA MANAGER

*See Instructions On Reverse Side

OIL CONSERVATION DIVISION

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTP. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-107
Revised 10-1

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

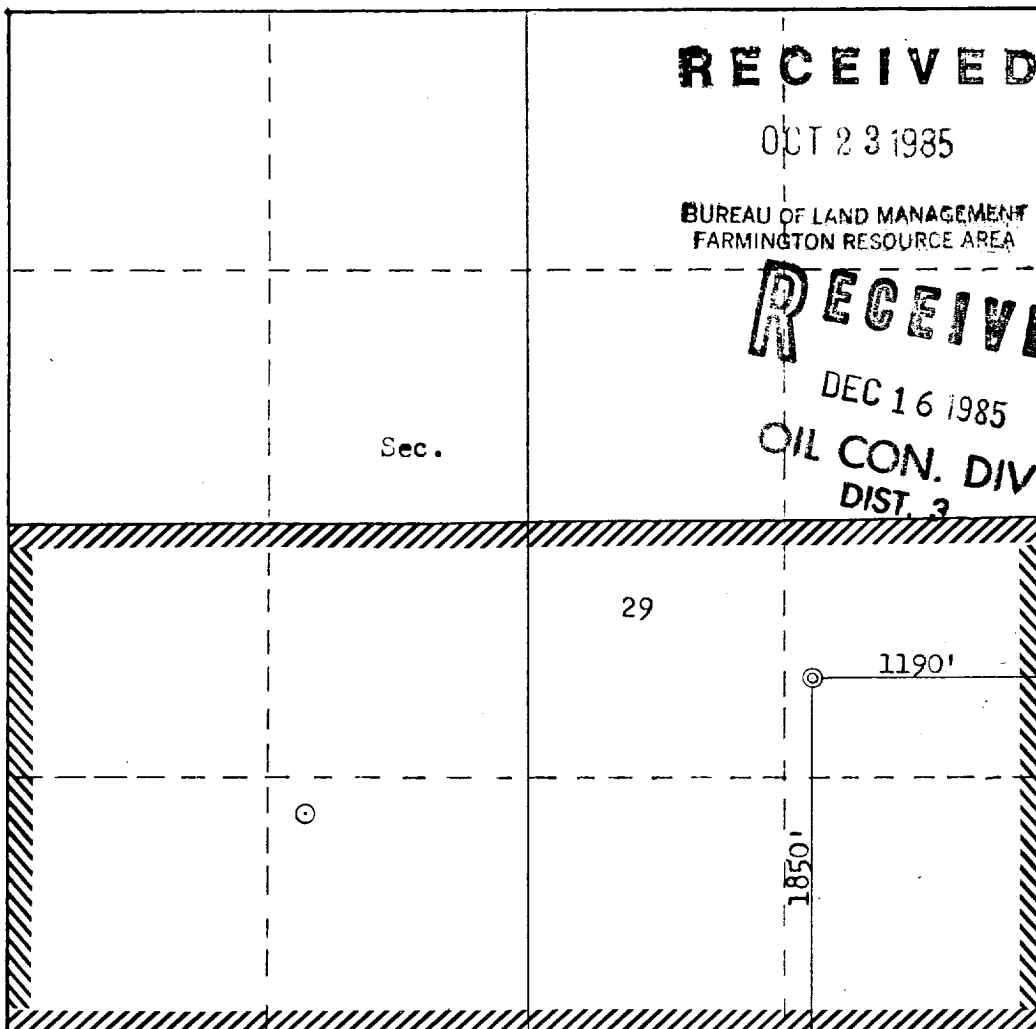
Operator EL PASO NATURAL GAS COMPANY			Lease JICARILLA 67 (Jic.Cont.#67)		Well No. SE
Unit Letter I	Section 29	Township 25N	Range 5W	County Rio Arriba	
Actual Footage Location of Well: 1850 feet from the South line and 1190 feet from the East line					
Ground Level Elev: 6633	Producing Formation Dakota		Pool Basin		Dedicated Acreage: 5.320 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, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



Scale: 1"=1000'

CERTIFICATION

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

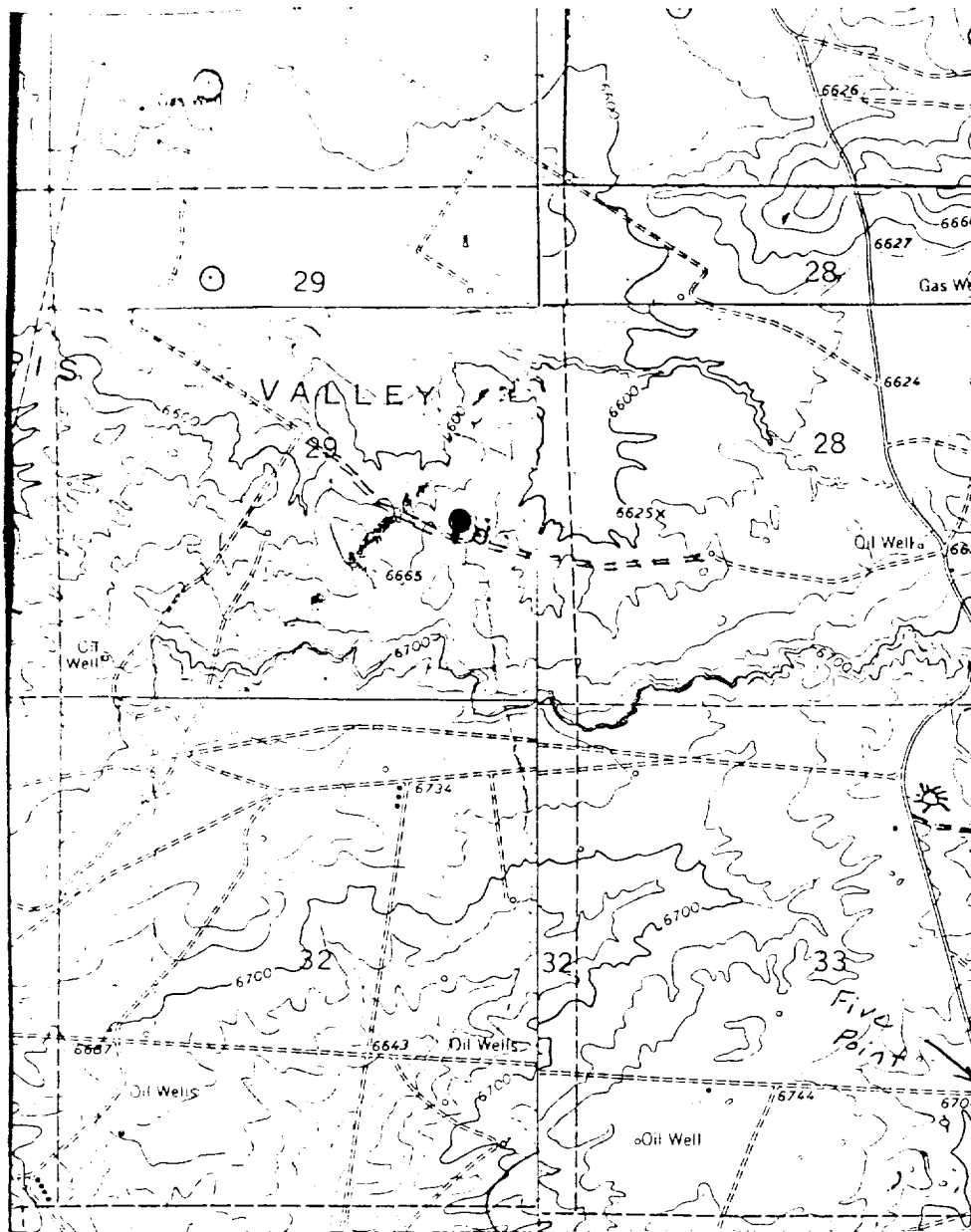
Name
Drilling Clerk
Position
El Paso Natural Gas
Company

Date

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
March 16, 1985
Registered Professional Engineer
and Land Surveyor
Fred B. Kerr, Jr.
Certificate No. 3950

Jicarilla 67 #5E (DK)
SE 29-25-5



Map #1

LEGEND OF RIGHT-OF-WAYS

EXISTING ROADS	—————
EXISTING PIPELINES	+ + +
EXISTING ROAD & PIPELINE	+++
PROPOSED ROADS	—————
PROPOSED PIPELINES	+ + +
PROPOSED ROAD & PIPELINE	+++

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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	5. LEASE DESIGNATION AND SERIAL NO. Jic.Contract #67
2. NAME OF OPERATOR El Paso Natural Gas Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Post Office Box 4289, Farmington, NM 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 1850'S, 1190'E	8. FARM OR LEASE NAME Jicarilla 67
	9. WELL NO. 5E
	10. FIELD AND POOL, OR WILDCAT Basin Dakota
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec.29,T-25-N,R- 5-W N.M.P.M.
14. PERMIT NO. DEC 30 1985	12. COUNTY OR PARISH Rio Arriba NM
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6633'GL	13. STATE

RECEIVED

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

NOTICE INTENTION TO:		SUBSEQUENT REPORT OF:	
BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA			
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>Spud Well</u>	
(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.)*

12-24-85 Spudded well at 3:00 a.m. 12-24-85. Drilled to 226'. Ran 5 jts. 9 5/8", 32.3#, H-40 surface casing set at 226'. Cemented with 160 sks. Class "B" with 1/4#/sk. gel-flake and 3% calcium chloride (189 cu.ft.). Circulated to surface. WOC 12 hours. Tested 600#/30 minutes, held ok.

RECEIVED
JAN 5 1986
OIL & GAS DIV.
BOL. 2

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

SIGNED <u>Peggy Drah</u>	TITLE <u>Drilling Clerk</u>	DATE <u>12-27-85</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

NMOCC

02-004