Form 3160-5 (August, 1999)

UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. SUBMIT IN TRIPLICATE - Other Instructions on recess side. Type of Well	OMB No. 1004-0135 Expires: November 30, 2000 5. Lease Serial No. NMSF-078895 6. If Indian, Allottee or Tribe Name 7. If Unit or CA/Agreement, Name and/or No.	
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. SUBMITIN TRIPLICATE - Other Instructions on recess side.	5. Lease Serial No. NMSF-078895 6. If Indian, Allottee or Tribe Name	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. SUBMIT IN TRIPLICATE - Other Infractions on reverse side Type of Well	NMSF-078895 6. If Indian, Allottee or Tribe Name	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. SUBMIT IN TRIPLICATE - Other Infractions on reverse side	6. If Indian, Allottee or Tribe Name	
abandoned well. Use Form 3160-3 (APD) for such proposals. SUBMIT IN TRIPLICATE - Other Instructions on regions side Type of Well	9 23	
SUBMIT IN TRIPLICATE - Other Instructions on Fevers side	7. If Unit or CA/Agreement, Name and/or No	
Type of Well	7. If Unit or CA/Agreement, Name and/or No.	
Type of Well	1/ If Onit of CA/Agreement, Name and/or No.	
	8 Well Name and No	
	Well Name and No.	
Name of Operator	Mudge A A	
NUIS DREVEUS MATURAL CAG CORD	9. API Well No.	
DUIS DREYFUS NATURAL GAS CORP.	· · · · · · · · · · · · · · · · · · ·	
Address Suite 600 3b Phone No (include area code)	30-045-06929 —	
1000 QUAIL SPGS PKWY, OKLA CITY, OK 73134 405-749-1300	10. Field and Pool, or Exploratory Area	
Location of Well (Footage, Sec., T., R., M., or Survey Description)	┥	
	Kutz W Pictured Cliffs	
	11. County or Parish. State	
OLENIA A AAAA TAAA	11. County or Parish, State	
NO FINE & COOK FINE COOK COOK 1414/		
0' FNL & 990' FWL, Sec. 6-27N-11W		
	San Juan, NM	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RE		
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RETURE OF SUBMISSION TYPE OF SUBMISSION TYPE OF ACTION	PORT OR OTHER DATA	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RETTYPE OF SUBMISSION TYPE OF ACTION	PORT OR OTHER DATA	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RETYPE OF SUBMISSION TYPE OF ACTION Acidize Deepen Production	PORT OR OTHER DATA ON (Start/Resume)	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RETYPE OF SUBMISSION TYPE OF ACTION Acidize Acidize Altering Casing Fracture Treat Reclamation	PORT OR OTHER DATA ON (Start/Resume) Water Shut-Off Well integrity	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RETYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Acidize Acidize Acidize Deepen Production Reclamation Subsequent Report Casing Repair New Construction Recomplete	PORT OR OTHER DATA ON (Start/Resume)	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RETYPE OF SUBMISSION TYPE OF ACTION Acidize Acidize Acidize Altering Casing Fracture Treat Reclamation	PORT OR OTHER DATA ON (Start/Resume) Water Shut-Off Well integrity Other	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RETTYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Acidize Acidize Acidize Acidize Acidize Acidize Casing Repair New Construction Recomplete	PORT OR OTHER DATA ON (Start/Resume)	

See attached report for detailed information.

Carla Christian	Title	Pogulator, Tochni	oi o o
	Title	Regulatory Technician	
Signature Cala Christian	Date July 1		
THIS SPACE FOR FEDERAL OR STA	TE OFFICE	USE	
Approved by	Title		Date

Section 1001 and Title 43 U.S.C. Section 1212, 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.

1 15 200



Key Emergy Services, Inc. Four Corners Division 5651 US Highway 64 P.O. Box 900 Farmington, NM 87499

Phone: 505-327-4935 Fax: 505-327-4962

PLUG & ABANDON CEMENT SERVICE REPORT

WELLNAME:

MUDGE #8-A

TOTAL PLUGS SET: 3

DATE STARTED:

06-25-01

TOTAL SACKS USED: 302 sx

DATE COMPLETED: 06-27-01

BLM WITNESS: M. WADE OPERATOR WITNESS: N/A

MOL AND RU RIG. ND WELLHEAD AND NU BOP. RU FLOOR AND POH AND LD 87- JTS 1" TUBING. DROPPED 5 OR 6 JTS DOWN HOLE DUE TO SLIPS FAILING. ESTABLISHED INJECTION RATE INTO PERFORATIONS AT 4 BPM WITH 75 PSI. DISCUSSED CEMENT VOLUMES WITH BLM REP. ON LOCATION.

PLUG #1 (FRUITLAND, PICTURE CLIFF, 780' – 1852'),
MIXED 88 SX CL. B CMENT + 2 1/3/6 C2CL AND DISPLACED WITH 4 BBL WATER, SQUEEZING
PERFORATIONS TO 2000 PSI. BLM APPROVED TO PERFORATE BEFORE CEMENT SET UP.

PLUG #2 (OJO ALAMO, KIRTLAND, 375' – 780'),
RU WIRELINE AND TAG TOC AT 650'. RIH TO 780' AND PERFORATED SQUEEZE HOLES. POH.
ESTABLISHED INJECTION RATE INTO PERFORATIONS WITH 40 BBL FRESH WATER AT .5 BPM
WITH 1000 PSI. BLM APPROVED TO CEMENT. MIXED 102 SX CL. B CEMENT WITH A
STARTING DENSITY OF 11,6 PPG AND AN ENDING DENSITY OF 14.6 PPG. DISPLACED TO 503'.
WOG 2 HRS. RU WIRELINE AND RIH WITH 2" GAUGE RING TO TAG TOC, TOC AT 375'. POH.
BLM APPROVED TO PERFORATE AT 143'.

PILUG #3 (SURFACE, SHOE, 0' – 143'), RIH WITH WIRELINE AND PERFORATED SQUEEZE HOLES AT 143'. ESTABLISHED CIRCULATION TO SURFACE WITH WATER. MIXED 112 SX CL. B CEMENT TO CIRCULATE GOOD CEMENT TO SURFACE.

RD FLOOR AND DUG CELLAR, CUT OFF WELLHEAD. CEMENT AT SURFACE. WELD ON DRY HOLE MARKER, RD RIG AND MOL.

NATHAN E. CRAWFORD P&A SUPERVISOR