

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
 Morgan-Richardson Operating Co.

3. ADDRESS OF OPERATOR
 P. O. Box 1915 Farmington, NM 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)
 At surface 1150' FNL, 1180' FEL (NENE)
 At proposed prod. zone Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 15 miles from Blanco, NM

10. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)
 16. NO. OF ACRES IN LEASE 1720

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
 19. PROPOSED DEPTH 3000'

21. ELEVATIONS (Show whether BF, RT, GR, etc.)
 6332' GR

23. PROPOSED CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH
12 1/4"	8 5/8"	24 #	240'
7 7/8"	5 1/2"	15.5 #	3000'

DRILLING OPERATIONS AUTHORIZED ARE
 SUBJECT TO COMPLETION WITH ATTACHED
 "GENERAL REQUIREMENTS" surface)
 150 sx (cement to surface)
 450 sx (cement to surface)

5. LEASE DESIGNATION AND SERIAL NO.
 SF 078390
 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
 7. UNIT AGREEMENT NAME
 8. FARM OR LEASE NAME
 Federal 14-14
 9. WELL NO.
 #1
 10. FIELD AND POOL, OR WILDCAT
 Basin Fruitland Coal
 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 14, T28N, R8W, NMPM
 12. COUNTY OR PARISH
 San Juan
 13. STATE
 NM

17. NO. OF ACRES ASSIGNED TO THIS WELL E/320
 20. ROTARY OR CABLE TOOLS
 Rotary
 22. APPROX. DATE WORK WILL START*
 As soon as permitted

RECEIVED

JUL 02 1990

BUREAU OF LAND MANAGEMENT TIGHT HOLE. PLEASE KEEP CONFIDENTIAL.
 FARMINGTON RESOURCE AREA

Notice of staking filed June 8, 1990.

RECEIVED

AUG 1 1990

OIL CON. DIV.
 DIST. 3

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.

SIGNED Bruce E. Delventhal TITLE Agent DATE June 25, 1990
 (This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE JUL 24 1990
 CONDITIONS OF APPROVAL, IF ANY:

Handwritten initials

NMOCD

APPROVED
 AS AMENDED
 AREA MANAGER

*See Instructions On Reverse Side

Submit to Appropriate District Office
 State Lease - 4 copies
 Fee Lease - 3 copies

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-102
 Revised 1-1-89

OIL CONSERVATION DIVISION

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

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

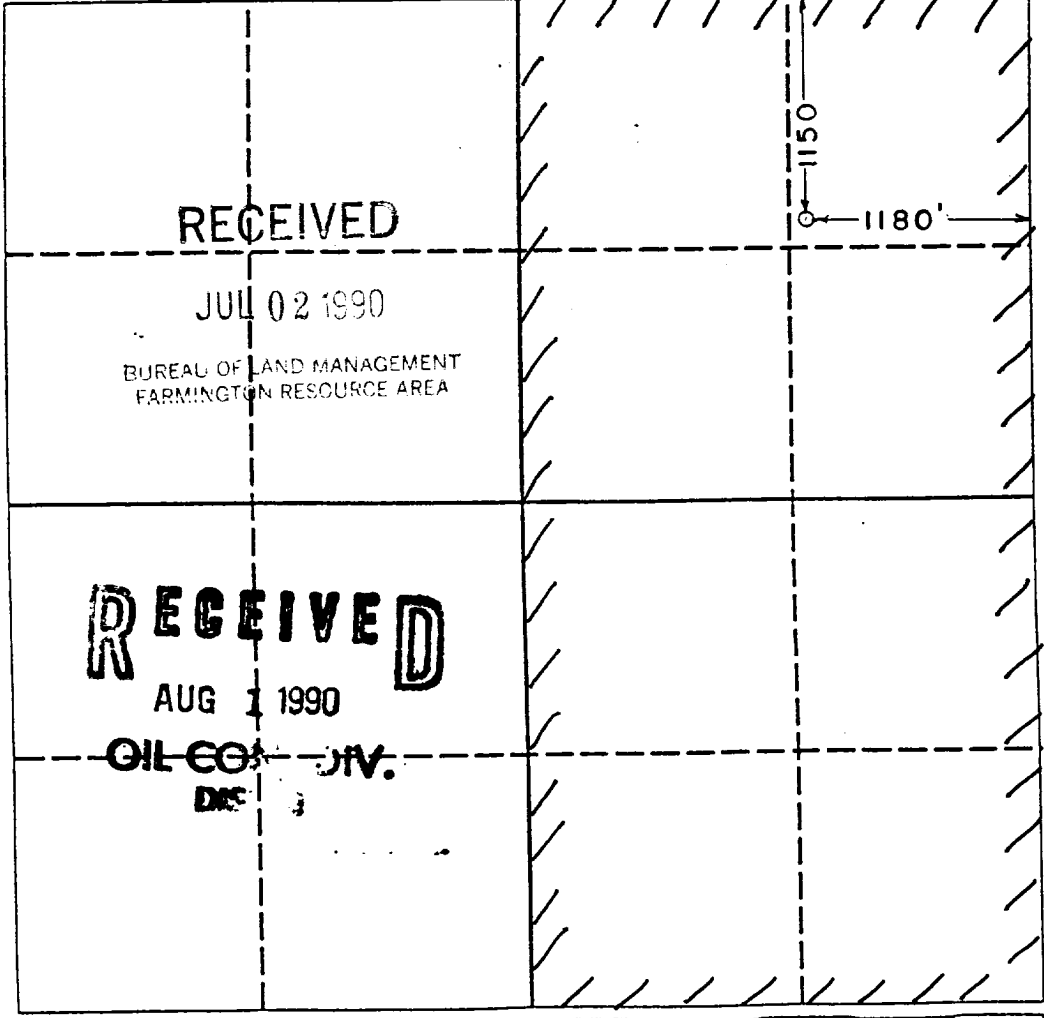
Operator MORGAN RICHARDSON OPERATING, CO.		Lease <i>Feet 14-14</i>		Well No. Feet 14-14 #1
Unit Letter A	Section 14	Township 28 North	Range 8 West	County San Juan
Actual Footage Location of Well: 1150 feet from the North line and 1180 feet from the East line				
Ground level Elev. 6332'	Producing Formation Fruitland	Pool Basin Fruitland Coal	Dedicated Acreage: 320 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest 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 interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature: *Bruce E. Delventhal*

Printed Name: **Bruce E. Delventhal**

Position: **Agent**

Company: **Morgan-Richardson Op.**

Date: **June 25, 1990**

SURVEYOR CERTIFICATION

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: *12 June 90*

Signature & Seal of Professional Surveyor: *[Signature]*

Certificate: **6844**

ERALD H. HUDDLESTON
 NEW MEXICO
 REGISTERED PROFESSIONAL SURVEYOR