

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Budget Bureau No. 1004-038
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 013860 A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal 24-25

9. WELL NO.

#1

10. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coal

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

25, T28N, R8W NMPM

12. COUNTY OR PARISH

San Juan

13. STATE

NM

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

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.*
See also space 17 below.)
At surface

1340' FNL, 970' FEL (SENE)

14. PERMIT NO.

30-045-28056

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6326' GR

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 PLANE

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 perti-
nent to this work.)*

Morgan Richardson Operating Co. requests permission to change the proposed
production casing string from 5 1/2", 15.5#, J-55 to 4 1/2", 10.5#, J-55 casing.

RECEIVED
SEP 2 1990
OIL CON. DIV.
FARMINGTON, N.M.

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

SIGNED Bruce C. Delventhal

TITLE Agent

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED

DATE August 20, 1990

DATE 8 1 1990

Ken Townsend

FOR AREA MANAGER
FARMINGTON REGIONAL OFFICE

*See Instructions on Reverse Side