

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on  
reverse side)

Form approved.  
Budget Bureau No. 1004-0136  
Expires August 31, 1985

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

Incline Reserves, Inc.

3. ADDRESS OF OPERATOR

1603 SW 37th Topeka, KS 66611

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)\*

At surface 1450' FSL, 2250' FWL (NESW)  
At proposed prod. zone Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE\*

12 miles from Blanco, NM

15. 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

1198.28

17. NO. OF ACRES ASSIGNED  
TO THIS WELL

320 267.72

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

19. PROPOSED DEPTH

2350'

20. ROTARY OR CABLE TOOLS

Rotary

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

5775' GR

This action is subject to technical and  
procedural review pursuant to 43 CFR 3105.3  
and appeal pursuant to 43 CFR 3105.4.

22. APPROX. DATE WORK WILL START\*

As soon as permitted

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	DRILLING OPERATIONS AUTHORIZED ARE SUBJECT TO COMPLIANCE WITH ATTACHED "GENERAL REQUIREMENTS"
12 1/4"	8 5/8"	20#	240'	150 sx (cement to surface)
7 7/8"	4 1/2"	19.5#	2350'	275 sx (cement to surface)

RECEIVED

DEC 07 1990

OIL CON. DIV.  
DIST. 3

"Approval of this action  
not warrant that the  
holder legal or equitable  
or title to this lease."

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

Dana DeMentha

TITLE

Agent

DATE

Oct. 22, 1990

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

Hold C-104 FOR NSL @ AMOCD

\*See Instructions On Reverse Side

Title 18 U.S.C. Section 1001, 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.

OIL CONSERVATION DIVISION

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

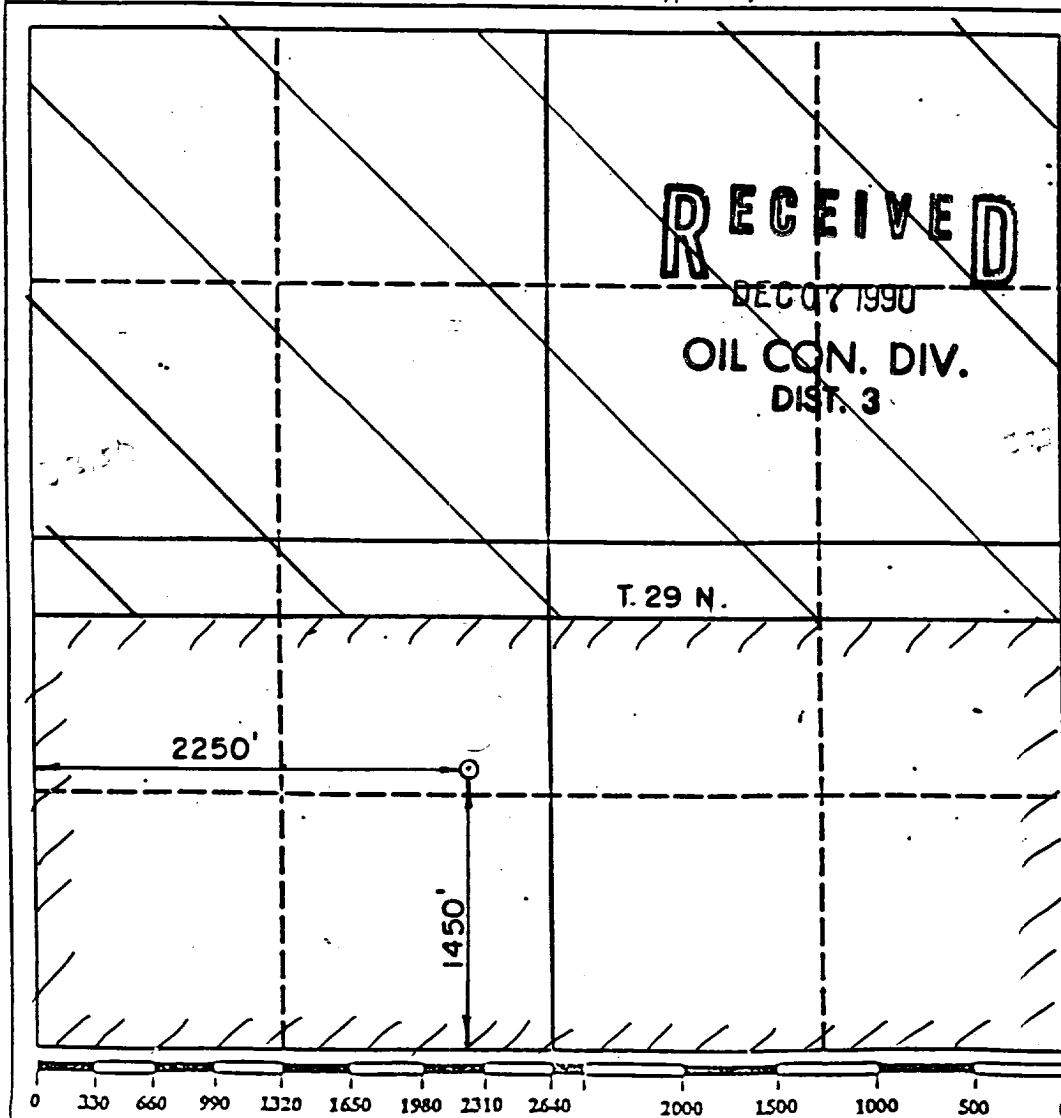
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator <b>INCLINE RESERVES.</b>		Lease <i>Federal 11</i>		Well <del>Fed.</del> <b>11 #2</b>	
Unit Letter <b>K</b>	Section <b>11</b>	Township <b>28 North</b>	Range <b>9 West</b>	County <b>San Juan</b>	
Actual Footage Location of Well: <b>1450</b> feet from the <b>South</b> line and <b>2250</b> feet from the <b>West</b>					
Ground level Elev. <b>5775</b>	Producing Formation <b>Fruitland</b>		Pool <b>Basin Fruitland Coal</b>		Dedicated Acreage: <del>320</del> <b>267.72</b> Acres

- Outline the acreage dedicated to the subject well by colored pencil or hatchure 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  
*Dana Delventhal*

Printed Name  
Dana Delventhal

Position  
Agent

Company  
Incline Reserves, Inc.

Date  
October 22, 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  
*22 OCT 1990*

Signature of State  
Professional Surveyor

*[Signature]*  
REGISTERED LAND SURVEYOR

Certificate No.

**6844**

