

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires November 30, 2000

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 reverse side

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Cross Timbers Operating Company

3a. Address 3b. Phone No. (include area code)
2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401 324 1090

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

960' FSL & 1,160' FEL Unit P, Sec 30, T 28 N, R 11 W

5. Lease Serial No.

SF 080844

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No

8. Well Name and No.

T.L Rhodes C #2

9. API Well No.

30-045-11817

10. Field and Pool, or Exploratory Area

Basin Dakota

Kutz Gallup

11. County or Parish, State

San Juan NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

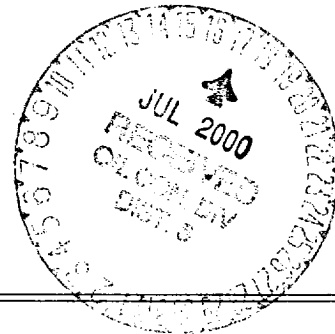
TYPE OF ACTION

- ☐ Acidize ☐ Deepen ☐ Production (Start/Resume) ☐ Water Shut-Off
☐ Alter Casing ☐ Fracture Treat ☐ Reclamation ☐ Well Integrity
☐ Casing Repair ☐ New Construction ☐ Recomplete ☐ Other
☐ Change Plans ☐ Plug and Abandon ☐ Temporarily Abandon
☐ Convert to Injection ☒ Plug Back ☐ Water Disposal

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximated duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

Cross Timbers proposes to plug back the Dakota and re complete the Kutz Gallup formation per the following procedure.

1. MIRU PU. Set cement retainer @ 6,300'. Squeeze the Dakota perforations from 6,346'-6,468' with 50 sx class B cement. Spot 4 sx cement plug on top of retainer.
2. Perforate Gallup from 5,882'-90', 5,860'-66' and 5,844'-58' with 2 JSPF
3. Fracture stimulate Gallup with 69,500 gallons 20#, 70Q foamed 2% KCL water and 1411,000# 20/40 Brady sand.
4. Clean well up. RDMO PU.



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Loren W. Fothergill

Title

Production Engineer

Date

7-7-00

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

JUL 12 2000

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

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.

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
811 S. 1st Street, Artesia, NM 88210-2834
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-102
Revised October 18, 199
Instructions on bac
Submit to Appropriate District O
State Lease - 4 Copie
Fee Lease - 3 Copie

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

| | | |
|---|---|---|
| ¹ API Number 30-045-11817 | ² Pool Code 36550 56600 | ³ Pool Name SIMPSON Kutz Gallup |
| ⁴ Property Code | ⁵ Property Name T. L. Rhodes C | ⁶ Well Number 2 |
| ⁷ OGRID No. | ⁸ Operator Name Cross Timbers Operating Company | ⁹ Elevation 6,026' GL |

¹⁰ Surface Location

| | | | | | | | | | |
|--------------------|---------------|------------------|---------------|----------|----------------------|---------------------------|------------------------|------------------------|--------------------|
| UL or lot no. P | Section 30 | Township 28 N | Range 11 W | Lot. Idn | Feet from the 960 | North/South Line South | Feet from the 1,160 | East/West line East | County San Juan |
|--------------------|---------------|------------------|---------------|----------|----------------------|---------------------------|------------------------|------------------------|--------------------|

¹¹ Bottom Hole Location If Different From Surface

| | | | | | | | | | |
|---------------|---------|----------|-------|----------|---------------|------------------|---------------|----------------|--------|
| UL or lot no. | Section | Township | Range | Lot. Idn | Feet from the | North/South Line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|----------|---------------|------------------|---------------|----------------|--------|

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|-------------------------------------|-------------------------------|----------------------------------|-------------------------|
| ¹² Dedicated Acres 40 | ¹³ Joint or Infill | ¹⁴ Consolidation Code | ¹⁵ Order No. |
|-------------------------------------|-------------------------------|----------------------------------|-------------------------|

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

| | | | | |
|-------------------------------------|--|--|--|--|
| need new C102 for Simpson Gallup | | | | <div><p>¹⁷ OPERATOR CERTIFICATION</p><p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p><p><u>Loren W Fothergill</u> Signature Loren W Fothergill Printed Name Production Title 6/28/00 Date</p><p>¹⁸ SURVEYOR CERTIFICATION</p><p>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 belief.</p><p>8/29/66 Date of Survey Signature and Seal of Professional Surveyer: <u>original signed by</u> James P. Leese 1463 Certificate Number</p></div> |
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