LIXITED STATES

FORM APPROVED OMB No. 1004 0/156 Expires November 30, 3500

DEPARTMENT OF T		·	
BUREAU OF LAND Y		 Lease Serial No. NMSF - 078905 	
APPLICATION FOR PERMIT	TO DRILL OR REENTER	n II Indian, Allottee or Tribe	Name
La. Type of Work: ☑ DRILL ☐ REENTER	CONFIDENTIAL	7. If Unit or CA Agreement,	Name and No.
15. Type of Well: ☐ Oil Well 🔀 Gas Well ☐ Oth	ner ⊠ Single Zone ☐ Multiple Zone	8. Lease Name and Well No GALLEGOS CANYON	JNIT 580
	MARY CORLEY E-Mail: corleyml@bp.com	9. API Well No. 30 - 301	679
3a Address P.O. BOX 3092 HOUSTON, TX 77253	3b. Phone No. (include area code) Ph: 281.366.4491 Fx: 281.366.0700	10. Field and Pool, or Explor KUTZ PICTURED CL	ratory LIFFS, WEST
4 Location of Well (Report location clearly and in accorda	nce with any State requirements.*)	11, Sec., T., R., M., or Blk. a	nd Survey or Area
At surface SESW Lot N 1080FSL 184	0FWL	Sec 13 T28N R12W	Mer NMP
At proposed prod. zone			
14. Distance in miles and direction from nearest town or post 10 MILES FROM BLOOMFIELD, NM	AUG 2001	12. County or Parish SAN JUAN	13. State NM
15. Distance from proposed location to nearest property or lease line, ft. (Also to nearest drig, unit line, if any)	43102.00 (2) 01 00 01 01 0	17. Spacing Unit dedicated to	o this well
18. Distance from proposed location to nearest well, drilling, completed, applied for, on this lease, ft.	19. Proposed De N D	20. BLM/BIA Bond No. on	îile .
21. Elevations (Show whether DF, KB, RT, GL, etc. 570 GL	22. Approximate date work will correct 07/01/2001	23. Estimated duration	
	24. Attachments		
The following, completed in accordance with the requirements or	f Onshore Oil and Gas Order No. 1, shall be attached to t	his form:	
 Well plat certified by a registered surveyor. A Drilling Plan. A Surface Use Plan (if the location is on National Forest Syst SUPO shall be filed with the appropriate Forest Service Of 	Item 20 above). 5. Operator certification	ormation and/or plans as may b	-
25. Signature	Name (Printed Typed) MARY CORLEY		Date 05/23/2001
Title AUTHORIZED REPRESENTATIVE			· .
Approved by (Signature)	Name (Printed/Typed)		Date
/s/ Joel Farrell			AUG 2.1
Title	Office		

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

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

Additional Operator Remarks (see next page)

Electronic Submission #4481 verified by the BLM Well Information System
For AMOCO PRODUCTION COMPANY, sent to the Farmington
Committed to AFMSS for processing by Maurice Johnson on 05/29/2001 () and the tel paraliant to 40 CFR 3155.4.

** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL **

Form 3160-5 (August 1999)

UNITED STATES

FORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000

DI	EPARTMENT OF THE I	NTERIOR	- AN 833	1620	Expires	: November 30, 2000	
	UREAU OF LAND MANA		ASSULT S		5. Lease Serial No NMSF-07890		
Do not uso th	NOTICES AND REPO is form for proposals to	drill or to ro-d	nhar an	0004	If Indian, Allott		_
abandoned we	III. Use form 3160-3 (AP	D) for such pro	posals/NUG	2001			
	IPLICATE - Other instruc	ctions on revel	se si		NJ	Agreement, Name and/or No.	
Type of Well Oil Well	her	(, , ×,	Well Name and GALLEGOS	No. CANYON UNIT 580	
Name of Operator AMOCO PRODUCTION COM	Contact:	MARY CORLE E-Mail: corleyr		8 100	9. API Well No.		
3a. Address P.O. BOX 3092 HOUSTON, TX 77253		3b. Phone No. (Ph: 281.366. Fx: 281.366.)	10. Field and Pool WEST KUTZ	l, or Exploratory Z PICTURED CLIFFS	
4. Location of Well (Footage, Sec.,	T., R., M., or Survey Description	1)			11. County or Par	rish, and State	
Sec 13 T28N R12W Mer SES	SW 1080FSL 1840FWL				SAN JUAN (COUNTY, NM	
12. CHECK APP	ROPRIATE BOX(ES) T	O INDICATE N	NATURE OF	NOTICE, R	EPORT, OR OT	HER DATA	
TYPE OF SUBMISSION			ТҮРЕ О	F ACTION			
☑ Notice of Intent	☐ Acidize	☐ Deepe	n	☐ Product	tion (Start/Resume	e)	
	☐ Alter Casing	☐ Fractu	re Treat	☐ Reclam	ation	☐ Well Integrity	
☐ Subsequent Report	☐ Casing Repair	□ New (Construction	☐ Recom	plete	☑ APDCH	
☐ Final Abandonment Notice	☐ Change Plans	🗖 Plug a	nd Abandon	□ Tempor	rarily Abandon		
	☐ Convert to Injection	🗖 Plug I	Back	☐ Water I	Disposal		
13. Describe Proposed or Completed Or If the proposal is to deepen direction Attach the Bond under which the wrollowing completion of the involve testing has been completed. Final Adetermined that the site is ready for On June 15, 2001, Amoco Praktached please find amendr Additionally, we are amendin is as follows: Hole size: 6 1/4" Casing Statting Depth: 1791' Cement: 125 SXS (261 CU Density/Yield/Water: LEAD	nally or recomplete horizontally ork will be performed or provided operations. If the operation rebandonment Notices shall be fifinal inspection.) roduction Company subminents to our original drilling the total depth from 169 ize: 4 1/2" 10.5# J-55 Size: 4 1/2" 10.5# J	, give subsurface loe the Bond No. on found is the sults in a multiple led only after all reditted for your apg and completic off to 1791' and ST&C	cations and measing with BLM/BL/ completion or recupuirements, including proval an applying plan as well the casing an	ured and true v. A. Required su ompletion in a ding reclamatio lication for p as the corre d cementing	ertical depths of all p bisequent reports sha new interval, a Form in, have been comple ermit to drill the s	subject well.	
14. I hereby certify that the foregoing Name (Printed/Typed) MARY C	Electronic Submission For AMOCO PRO Committed to AFM	DDUCTION COM ISS for processi	PANY, sent to t ng by Lucy Bee	he Farmingto on 07/18/20	on		
Signature 1973			Date 07/13/2	001			
	THIS SPACE F	OR FEDERAL	OR STATE	OFFICE L	ISE		
Approved By /8/ Joel	Farreil		Title		D	atcAUG 2.1	
Conditions of approval, if any, are attack certify that the applicant holds legal or e which would entitle the applicant to con	quitable title to those rights in the		Office				

** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL **

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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 PO Drawer KK, Artesia, NM 87211-0719 District III

State of New Mexico Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION PO Eox 2088 Santa Fe, NM 87504-2088

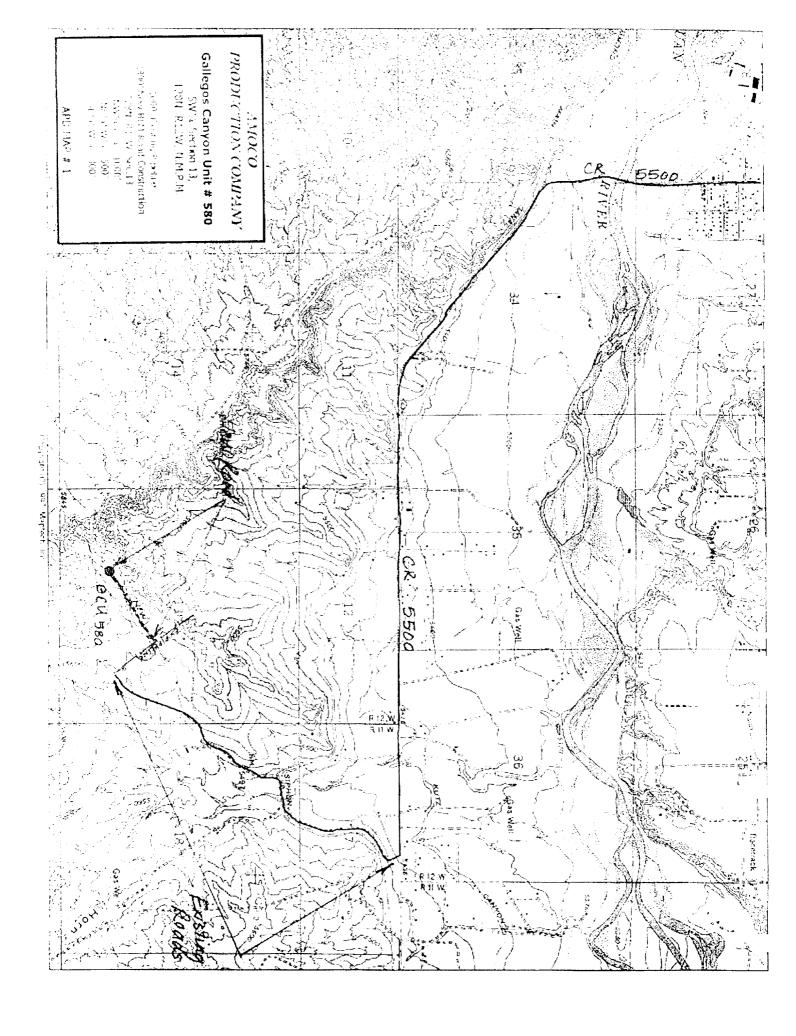
Form C-102 Revised February 21, 1994 Instructions on back Submit to Appropriate District Office

PROFESSIONA

7016 Certificate Number State Lease - 4 Copies Fee Lease - 3 Copies

1000 Rio Brazos Rd., Aztec, NM 87410 District IV PO Box 2088, Santa Fe, NM 87504-2088 AMENDED REPORT WELL LOCATION AND ACREAGE DEDICATION PLAT Gallegos Canyon Unit # 580 1 Operator Name Elevation 1000000 AMOCO PRODUCTION COMPANY 5709 Surface Location UL or Lot No. Section Range Lot Idn Feet from the East/West line County Feer from the N 13 28 N 12 W SAN JUAN 1080 SOUTH 1840 WEST 11 Bottom Hole Location If Different From Surface East/West line UI or locks. Section Township County Feet from the Demonted Acres 1 Joint or Infill is Consolidation Code 2 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 5289(R) OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. "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 belief. April 16, 2001 Date of Survey Signature and Se 1840'

1080



AMOCO PRODUCTION COMPANY DRILLING AND COMPLETION PROGRAM

Prospect Name: GCU 580 Well No: 580

Lease: GALLEGOS CANYON UNIT
County: San Juan State: New Mexico Date: July 13, 2001 revised

Well No: 580

Surface Location: 1080' FSL & 1840' FWL Sec. 13, 28N-12W

Field: West Kutz Pictured Cliffs

OBJECTIVE: Drill 200	into the F		s, set 4 ½" casing	to TD, perf & s	stimulate P	ictured Cli	ffs interval	
		DRILLING					EOLOGICAL M	ARKER
TYPE OF TOOLS		DEPTH OF	DRILLING	Estimate		' 09	Estimated KB	
Rotary/Top Drive		0 - TD		MARKE	R		SUBSEA	MEAS. DEPTH
	LOG PRO			Ojo Alamo			5346	374
TYPE		DEPTH INVERAL		Kirtland			5253	467
Open Hole (Platform E	xpress)	TD to base	of surface casing	Fruitland C Pictured CI		t	4429 4129	1291 1591
REMARKS:							7125	1391
- Please report any fla	res (magnit	tude & dura	tion).	TOTAL DE	PTH		3929	1791
				# Completion interval * Possible Pay				
	SPECIAL	TESTS			ITTING SA	MPLES	DRILLIN	
TYPE				FREQUEN			FREQUENCY	
None				None			Geolograph	0-TD
REMARKS:								
MUD PROGRAM:								
Approx. Interval		Type Muc	l Weight, #/ga	al Vis, sec/q	t W/Lo	c's/30 mi	n Other Spe	cification
0 - 120-135	3 jts.	Spud	8.6-9.2					
120-135 - TD	(1)	Water/LSN	ND 8.6-9.2					
REMARKS:								
(1) The hole will requir	e swe eps t	o keep unlo	aded while fresh w	ater drilling. L	et hole cor	iditions dic	tate frequency.	
CASING PROGRAM:	(Normally, tu	bular goods a	llocation letter specifie	s casing sizes to	be used. Ho	le sizes will	be governed by Co	ntract)
Casing String	Estimat	ted Depth	Casing Size	Grade	Weight	Hole Size	Landing P	oint, Cement,
Surface/Conductor		120-135	7"	J 55 ST&C	23#	8.7	75" 1	-
Production		1791	4 ½"	J 55 ST&C	10.5#	6.2	25" 1,2	
REMARKS: (1) Circulate Cement to (2) Set casing 200' bel		Pictured Cliff	S					
CORING PROGRAM: None								
COMPLETION PROGR	A 8.0							
		rac						
Rigless, Single Stage F	lydraulic Fi	rac						
Rigless, Single Stage F GENERAL REMARKS:	lydrauli <mark>c F</mark> ı		OP testing and Co	sing and Cer	entina			
Rigless, Single Stage F GENERAL REMARKS: Notify BLM/NMOCD 24	lydrauli <mark>c F</mark> ı					Di		
Rigless, Single Stage F GENERAL REMARKS: Notify BLM/NMOCD 24 Form 46 Reviewed by:	lydrauli <mark>c F</mark> ı	r to Spud, B	Logg	ing program re		DL	J	
Rigless, Single Stage F GENERAL REMARKS: Notify BLM/NMOCD 24	lydrauli <mark>c F</mark> ı		Logg			DL	J	
Rigless, Single Stage F GENERAL REMARKS: Notify BLM/NMOCD 24 Form 46 Reviewed by:	lydrauli <mark>c F</mark> ı	r to Spud, B	Logg	ing program re		DL	J	

Amoco Production Company BOP Pressure Testing Requirements

Well Name:

Gallegos Canyon Unit 580

County:

San Juan

State: New Mexico

Formation	TVD	Anticipated Bottom Hole Pressure	Maximum Anticipated Surface Pressure **
Ojo Alamo	275		
Kirtland	367		
Fruitland Coal	906		
Pictured Cliffs	1491		

** Note: Determined using the following formula: ABHP - (.22 * TVD) = ASP

Requested BOP Pressure Test Exception: 750 PSI

SAN JUAN BASIN Pictured Cliffs Formation Pressure Control Equipment

Background

The objective Pictured Cliffs formation maximum surface pressure is anticipated to be less than 1000 PSI, based on shut-in surface pressures from adjacent wells. Pressure control equipment working pressure minimum requirements are therefore 2000 PSI. Equipment to be used will conform to API RP-53 (Figure 2.C.2) for a 2000 PSI system per Federal Onshore Order No. 2. Due to available conventional equipment within the area, 3000 PSI rated pressure control equipment will typically be utilized in a double ram type arrangement. Regional drilling rights to be utilized have substructure height limitations which exclude the use of annular preventers; therefore a rotating head will be installed above these rams. This pressure control equipment will be utilized for conventional drilling below conductor to total depth. No abnormal temperature, pressure, or Hydrogen Sulfide gas is anticipated.

Equipment Specification

Interval

BOP Equipment

Below conductor casing to total depth

11" nominal or 7 1/16", 3000 PSI double ram preventer with rotating head.

All ram type preventers and related control equipment will be hydraulically tested to 250 PSI (low pressure) and 750 PSI (high pressure), upon installation, following any repairs or equipment replacements, or at 30 day intervals. Accessories to BOP equipment will include Kelly cock, upper Kelly cock with a handle available, floor safety valves and choke manifold which will also be tested to equivalent pressure at the appropriate intervals.