Form 3160-3 (November 1983) (formerly 9-331C)

UNITED STATES DEPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE. (Other instructions on reverse side)

Form spproved.
Budget Bureau No. 1004-0136 Expires August 31, 1985 30-045-27286

LEASE DESIGNATION AND STRIAL NO.

API No:

SF - 079043

BUREAU OF LAND MANAGEMENT						/ SF - 079043	
APPLICATIO	N FOR PERMIT	TO DRILL,	DEEP	PEN, OR PLUG E	BACK	6. IF INDIAN, ALLOTTER OR TRIBE NAME	
b. TYPE OF WELL OIL WELL 2. NAME OF OPERATOR	OAS WELL XX OTHER	DEEPEN	8	PLUG BA		7. UNIT AGREEMENT NAME Northeast Blanco Unit 8. FARM OR LEASE NAME Northeast Blanco Unit	
Blackwood & Nichols Co. 3. ADDRESS OF OPERATOR						9. WELL NO. 420	
P. O. Box 1237, Durango, Colorado 81302						10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*) At surface At proposed prod. zone 1030 FNL, 1485 FRL						11. SEC., T., B., M., OR BLE. AND SURVEY OR AREA Sec. 28, T31N, R7W	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* 16-1/2 miles northeast of Blanco, New Mexico						12. COUNTY OR PARISH 13. STATE San Juan NM	
15. DISTANCE FROM PROP LOCATION TO NEARES PROPERTY OR LEASE (Also to nearest dr)	LINE, FT.	030'	16. N	0. OF ACRES IN LEASE 2314.56	17. No. OF ACRES ASSIGNED TO THIS WELL 320		
18. DISTANCE FROM PROT TO NEAREST WELL, I OR APPLIED FOR, ON TE	150'	19. P	ROPOSED DEPTH		O. ROTARY OR CABLE TOOLS ROTARY		
21. BLEVATIONS (Show whether DF, RT, GR, etc.)					·	22. APPROX. DATE WORK WILL START	
6378 GL PROPOSED CASING AND CEMENTING PROGRAM						August 1, 1993	
SIZE OF HOLE SIZE OF CASING		WEIGHT PER F	00T	SETTING DEPTH	İ	QUANTITY OF CEMENT	
to pend	etrate basal con	al. No new	hori	JUL1 2 1993 OIL CON. DI Dist. 9	netrated	pen hole section RECEIVED RECEIVE RECEIVE RECEIVE RECEIVE RECEIVE RECEIVE RECEIVE RECEI	
signed Al Rocto	ector (by X)	(Z) TIT	LE Di	strict Superint	endent	DATS 7-02-93	
(This space for Fede	ral or State office use)		- 				
PERMIT No.		<u> </u>		APPROVAL DATE			
APPROVED BY CONDITIONS OF APPROV	AL, IF ANY:	TIT.	LE	· · · · · · · · · · · · · · · · · · ·		APPROVED	

*See Instructions On Reverse Side