

3. 3 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION
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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Operator Phillips Petroleum Company		Well API No. 30-045-27446
Address 300 W. Arrington, Suite 200, Farmington, NM 87401		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator Northwest Pipeline Corp., 3539 E. 30th. St., Farmington, NM 87401		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Blanco Unit	Well No. 201	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Foreign	Lease No. NM-012641
Location Unit Letter <u>L</u> : <u>1560</u> Feet From The <u>South</u> Line and <u>810</u> Feet From The <u>West</u> Line Section <u>35</u> Township <u>31N</u> Range <u>8 W</u> , <u>NMPM</u> , San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Northwest Pipeline Corporation	P.O. Box 58900, Salt Lake City, UT 84158	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? <input type="checkbox"/> When? Attn: Patt Rodgers	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

L.M. Sanders
Signature
L.M. Sanders Supv. Regulatory Affairs
Printed Name
June 4, 1990 (505) 599-3431
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 13 1990

By [Signature]
Title SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Northwest Pipeline Corporation		Well API No. 30-045-27446
Address 3539 East 30th Street - Farmington, NM 87401		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Blanco	Well No. 201	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State , Federal or Lease	Lease No. NM 012641
Location Unit Letter <u>L</u> : <u>1560</u> Feet From The <u>South</u> Line and <u>810</u> Feet From The <u>West</u> Line Section <u>35</u> Township <u>31N</u> Range <u>8W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Northwest Pipeline Corporation	3539 E. 30th - Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 35	Twp. 31N	Rge. 8W	Is gas actually connected?	When?

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 11-7-89	Date Compl. Ready to Prod. 4-11-90		Total Depth 3130'		P.B.T.D. 3083'			
Elevations (DF, RKB, RT, GR, etc.) 6207' KB 6194' GR	Name of Producing Formation Basin Fruitland Coal		Top Oil/Gas Pay 2905'		Tubing Depth 3051'			
Perforations 2905' - 3079'					Depth Casing Shoe 3084'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		229'		260			
12-1/4"	9-5/8"		2866'		815			
6-1/4"	5-1/2"		3084'		not cemented			
	2-7/8"		3051'					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

GAS WELL

Actual Prod. Test - MCF/D TSTM	Length of Test	Bbls. Condensate/MMCF	Gravity of Gas
Testing Method (pitot, back pr.) Pitot	Tubing Pressure (Shut-in) TSTM	Casing Pressure (Shut-in) TSTM	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Carrie Harmon
Signature
Carrie Harmon
Printed Name
4-25-90
Date
Prod. Assistant
Title
327-5351
Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 29 1990
By [Signature]
Title SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

(November 1983)
(Formerly 9-331)

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(Other Instructions on Reverse Side)

5. LEASE DESIGNATION AND SERIAL NO.

NM 012641

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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

Northwest Pipeline Corporation

3. ADDRESS OF OPERATOR

3539 East 30th Street - Farmington, NM 87401 MAY 14 1990

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

NW/SW 1560' FSL & 810' FW

PRODUCTION AND DRILL

7. UNIT AGREEMENT NAME

Blanco Unit

8. FARM OR LEASE NAME

Blanco Unit

9. WELL NO.

#201

10. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coal

11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA

Sec. 35L, T. 2N, R. 10W

12. PERMIT NO.

API #30-045-27446

13. ELEVATIONS (Show whether DP, RT, OR, etc.)

6194' GR

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

TEST WATER SHUT-OFF ☐ FILL OR ALTER Casing ☐
FRACTURE TREATMENT ☐ ABANDONMENT ☐
ABANDONMENT ☐
REPAIR WELL ☐ (Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐ REPAIRING WELL ☐
FRACTURE TREATMENT ☐ ALTERING CASING ☐
SHOOTING OR ACIDIZING ☐ ABANDONMENT ☐
(Other) Completion Operations ☒

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

15. 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 pertinent to this work.)

3-26-90: MOL & RU. Pressure tested blind rams to 2000#, held ok. Tagged cmt at 2796'. Drilled insert float at 2817' (6' high) and cmt to 2850'. Pressure tested 9-5/8" csg, pipe rams and HCR valves to 2000#, held ok. Started mixing mud to drill to first core point.

3-27-90: Mixing mud.

3-28-90: Drilling at 2890' to core point #1. TOH & laid down core #1.

3-29-90: TIH for additional core #1.

3-30-90: TOH to PU core #2. Finished TOH. Cut core #2. Began drilling to core point #3.

3-31-90: Drilled to core point #3 - TOH. Cut core #3.

4-1-90: Conditioned hole at TD for logs (TD at 3130') TOH. Ran DIL/GR, FDC/CNL/GR, BHC Sonic, Spectral GR, Microlog & Sidewall Formation Tester. TIH to spot cement across PC. Top PC at 3096'.

(continued on back)

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

SIGNED

Carrie Harmon
Carrie Harmon

TITLE

Production Assistant

ACCEPTED FOR RECORD 4-18-90

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

MAY 10 1990

DATE

FARMINGTON RESOURCE AREA

BY

ML

OPERATOR

*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.

4-2-90: Spotted 15 sx (18 cu.ft.) CV "B" w/ 3% CaCl₂ across PC. ---TOH & circulated---
WOC 3 hrs. Tagged cement at 3076'. CO to 3090' (top of PC at 3096').

4-3 thru 4-8: Blowing well.

4-9-90: Preparing to PU 5-1/2" liner. Snubbed in 5-1/2", 23#, P110, LT&C USS smls.
csg w/ 9-5/8" x 7" TIW JGS left hand set left hand release liner hanger. TIH w/ 3-1/2"
drill pipe & tagged fill at 3081' (PBD at 3090'). Circulated through fill
without rotating. Pulled up 6' & set liner hanger & pack off. Liner set from 2766'
to 3084' PBD at 3083'.

4-10-90: Rigging down snubbers. LDDP & setting tool. Ran GR/CCL log. Perfed as
follows: 3048'-3079' 4 spf, 2991'-3013' 4 spf, 2905'-2926' 4 spf. Total of 296
holes (.76" dia.).

4-11-90: TIH after perforating & tagged at 3083' (PBD). CO no fill to TD. Ran
97 jts (3038') 2-7/8", 6.4#, J-55, 10rd, NUE Argentina tbq. Landed at 3051' KB.
Rigged down sub & ND BOPs & NU wellhead. Pumped out plug. Shut well in.

4-12-90: Moved to town.

Post-It™ brand fax transmittal memo 7671		# of pages > 2
To: Dorothy	From: Carrie	
Co. NMOCD	Co. NWP	
Dept.	Phone #	
Fax #	Fax #	

RECEIVED
MAY 29 1990
OIL CON. DIV.
DIST ?

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Budget Bureau No. 1004-0135
Expires August 31, 1985

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.)

5. LEASE DESIGNATION AND SERIAL NO

NM 012641

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Blanco Unit

8. FARM OR LEASE NAME

Blanco Unit

9. WELL NO.

#201

10. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coal

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

Sec. 35L, T31N, R8W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

1. OIL ☐ GAS ☒ OTHER

2. NAME OF OPERATOR

Northwest Pipeline Corporation

3. ADDRESS OF OPERATOR

3539 East 30th Street - Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

NW/SW 1560' FSL & 810' FWL

14. PERMIT NO.

API #30-045-27446

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

6194' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

TEST WATER SHUT-OFF

PULL WATER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) Completion Operations

(Other)

DIST. 3

(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.)*

3-26-90: MOL & RU. Pressure tested blind rams to 2000#, held ok. Tagged cmt at 2796'.
Drilled insert float at 2817' (6' high) and cmt to 2850'. Pressure tested 9-5/8"
csg, pipe rams and HCR valves to 2000#, held ok. Started mixing mud to drill to
first core point.

3-27-90: Mixing mud.

3-28-90: Drilling at 2890' to core point #1. TOH & laid down core #1.

3-29-90: TIH for additional core #1.

3-30-90: TOH to PU core #2. Finished TOH. Cut core #2. Began drilling to core point
#3.

3-31-90: Drilled to core point #3 - TOH. Cut core #3.

4-1-90: Conditioned hole at TD for logs (TD at 3130') TOH. Ran DIL/GR, FDC/CNL/GR,
BHC Sonic, Spectral GR, Microlog & Sidewall Formation Tester. TIH to spot cement
across PC. Top PC at 3096'.

(continued on back)

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

SIGNED

Carrie Harmon

TITLE

Production Assistant

DATE

4-18-90

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

TITLE

MAY 10 1990

CONDITIONS OF APPROVAL, IF ANY:

FARMING

FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

BY

4-2-90: Spotted 15 sx (18 cu.ft.) C1 "B" w/ 3% CaCl₂ across PC. TOH & circulated. WOC 3 hrs. Tagged cement at 3076'. CO to 3090' (top² of PC at 3096').

4-3 thru 4-8: Blowing well.

4-9-90: Preparing to PU 5-1/2" liner. Snubbed in 5-1/2", 23#, P110, LT&C USS smls csg w/ 9-5/8" x 7" TIW JGS left hand set left hand release liner hanger. TIH w/ 3-1/2" drill pipe & tagged fill at 3081' (PBTD at 3090'). Circulated through fill without rotating. Pulled up 6' & set liner hanger & pack off. Liner set from 2766' to 3084' PBTD at 3083'.

4-10-90: Rigging down snubbers. LDDP & setting tool. Ran GR/CCL log. Perfed as follows: 3048'-3079' 4 spf, 2991'-3013' 4 spf, 2905'-2926' 4 spf. Total of 296 holes (.76" dia.).

4-11-90: TIH after perforating & tagged at 3083' (PBTD). CO no fill to TD. Ran 97 jts (3038') 2-7/8", 6.4#, J-55, 10rd, NUE Argentina tbg. Landed at 3051' KB. Rigged down sub & ND BOPs & NU wellhead. Pumped out plug. Shut well in.

4-12-90: Moved to town.

Santa Fe, New Mexico 87504-2088

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

L

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE					
Lease Name BLANCO	Well No. 201	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee	Lease No. NM 012641	
Location					
Unit Letter <u>L</u> : <u>1560</u> Feet From The <u>South</u> Line and <u>810</u> Feet From The <u>West</u> Line					
Section <u>35</u> Township <u>31N</u> Range <u>8W</u> , <u>NMPM</u> , <u>San Juan</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS							
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)			
None							
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>				Address (Give address to which approved copy of this form is to be sent)			
Phillips Petroleum Company				5525 Hwy 64 NBU 3004, Farmington, NM 87401			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?	

If this production is commingled with that from any other lease or pool, give commingling order number.

[illegible]

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

OIL WELL		
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Smithell

8-3-92

(505) 599-3412

De

Telephone No. _____

Date Approved AUG 06 1992

By

SUPERVISOR DISTRICT #3

Title

- INSTRUCTIONS:** This form is to be filed in compliance with Rule 1104
- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
 - 2) All sections of this form must be filled out for allowable on new and recompleted wells.
 - 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 - 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT - " for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-012641
2. Name of Operator Phillips Petroleum Company	6. If Indian, Allottee or Tribe Name Blanco Unit
3. Address and Telephone No. 5525 Highway 64, NBU 3004, Farmington, NM 87401 505-599-3454	7. If Unit or CA, Agreement Designation Blanco #201
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit L, 1560' FSL & 810' FWL Section 35, T31N, R8W	9. API Well No. 30-045-27446
	10. Field and Pool, or exploratory Area Basin Fruitland Coal
	11. County or Parish, State San Juan, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent <input type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <u>Changed out tubing</u>
<input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

13. 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 pertinent to this work.)*

Phillips is proposing to change out the tubing on this well sometime after January 1, 1997.
The scope of the work is as follows:

1. MIRU. NDWH & NU BOP.
2. Pull 2-7/8" tubing.
3. RIH & set 3-1/2" tubing.
4. ND BOP, NU WH. PT.
5. Turn well back over to production department.

All work will be done on existng well pad only. The work will last aprox. 3 - 5 days.

14. I hereby certify that the foregoing is true and correct Signed <u>[Signature]</u> Title <u>Regulatory Assistant</u> Date <u>12-12-96</u>	
(This space for Federal or State office use)	
Approved by _____ Title _____	APPROVED
Conditions of approval, if any:	Date _____

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.

* See Instruction on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT -" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Phillips Petroleum Company

3. Address and Telephone No.

5525 Highway 64, NBU 3004, Farmington, NM 87401 505-599-3454

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

Unit L, 1560' FSL & 810' FWL
Section 35, T31N, R8W

FORM APPROVED

Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.

NM-012641

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

Blanco Unit

8. Well Name and No.

Blanco #201

9. API Well No.

30-045-27446

10. Field and Pool, or exploratory Area

Basin Fruitland Coal

11. County or Parish, State

San Juan, NM

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

TYPE OF SUBMISSION

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

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Changed tubing out
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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 pertinent to this work.)*

12/18/96

MIRU Big A #18. LO/TO & Blow down location. RU Cudd Snub unit & COOH laying down 2-7/8" tubing. Changed out rams & equipment. RIH w/3-1/2" EUE 8rd tubing and set @ 3048'. RD BOPs and RU WH. Test. RD & released rig and turned well back over to production department 12/21/96.

RECEIVED
JAN 10 1997
OIL CON. DIV.
DIST. 3

RECEIVED
BLM
97 JAN -7 PM 12:25
070 FARMINGTON, NM

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

Signed Taisy Chueza

Title Regulatory Assistant

Date 12-30-96

(This space for Federal or State office use)

Approved by _____ Title _____
Conditions of approval, if any:

Date _____

JAN 08 1997

ACCEPTED FOR RECORD

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.

FARMINGTON DISTRICT OFFICE

* See Instruction on Reverse Side

NMOC

NEW MEXICO
Energy Minerals and Natural Resources Department

Oil Conservation Division

2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

APPLICATION FOR
WELL WORKOVER PROJECT

RECEIVED
JUL 15 1999
OIL CON. DIV.
OCD Number
017654

I. Operator and Well

Operator name & address Phillips Petroleum 5525 Hwy. 64 Farmington, NM 87401						OCD Number 017654		
Contact Party Patsy Clugston						Phone 505-599-3454		
Property Name Blanco				Well Number #201		API Number 30-045-27446		
UL L	Section 35	Township 31N	Range 8W	Feet From The 1560	North/South Line South	Feet From The 810	East/West Line West	County San Juan

II. Workover

Date Workover Commenced: 8/17/98	Previous Producing Pool(s) (Prior to Workover): Basin Fruitland Coal
Date Workover Completed: 8/20/98	

III. Attach a description of the Workover Procedures performed to increase production.

IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.

V. AFFIDAVIT:

State of New Mexico)
) ss.

County of San Juan)

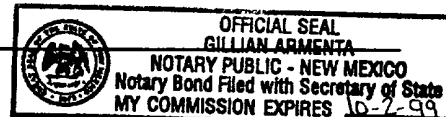
Patsy Clugston, being first duly sworn, upon oath states:

1. I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
2. I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
3. To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.

Signature Patsy Clugston Title Regulatory Assistant Date 7/13/99
SUBSCRIBED AND SWORN TO before me this 13th day of July, 1999.

Gillian Armenta
Notary Public

My Commission expires: _____



FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:

This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on 8/20/98.

Signature District Supervisor <u>35.7</u>	OCD District <u>3</u>	Date <u>7/16/99</u>
--	--------------------------	------------------------

VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

Blanco #201
NM-012641; API # - 30-045-27446
Unit L, 1560' FSL & 810' FWL
Section 35, T31N, R8W; San Juan County, NM

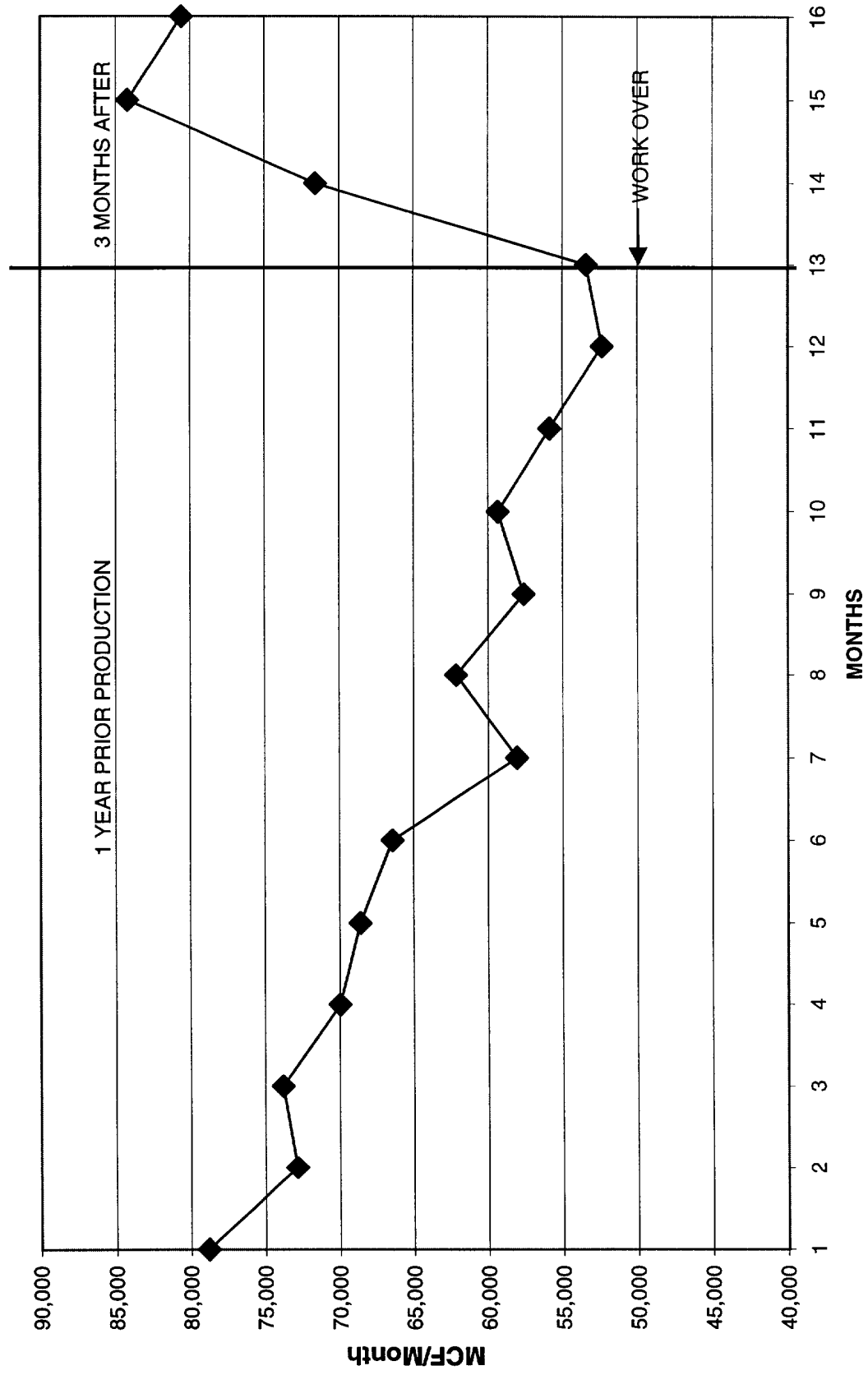
Description of Workover Procedure used to increase production of subject well:

A compressor was installed and the work entailed:

1. Taking exiting surface equipment off.
2. Replacing old equipment with bigger equipment, (i.e... bigger separator and flow lines).
3. Installing compressor manifold.
4. Debottlenecking location - eliminating any restrictions between wellhead and meter-run.
5. Installing compressor and hooking up.

The type of compressor installed is Cooper - 305 hp. Work began approx. 8/17/98 and was completed 8/20/98.

BLANCO #201 Workover Production Increase



API #	BLNC #201	MCF/Month
30-045-27446	1	78,809
	2	72,872
	3	73,802
	4	69,973
	5	68,597
	6	66,442
	7	58,075
	8	62,160
	9	57,615
	10	59,352
	11	55,877
	12	52,353
WORK OVER →	13	53,428
	14	71,588
	15	84,200
	16	80,583