

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 Coal Seam

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Amoco Production Company

ATTN: J. L. Hampton

3. ADDRESS OF OPERATOR

P. O. Box 800 Denver, Colorado 80201

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

At surface

1400' FNL, 790' FEL SE/NE

At proposed prod. zone

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

14 miles Aztec, NM

10. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(Also to nearest drlg. unit line, if any) 790'

16. NO. OF ACRES IN LEASE

1134.59

17. NO. OF ACRES ASSIGNED
TO THIS WELL

~~320~~ acres N/2 307 1/4

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

19. PROPOSED DEPTH

3711' TD

20. ROTARY OR CABLE TOOLS

Rotary

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

6755' GR 3135.3

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	QUANTITY OF CEMENT ATTACHED
12 1/4"	9 5/8"	36#	250'	200 cf Class B (cement to surface)
8 3/4"	7"	20#	3250'	910 cf Class B (cement to surface)
6 1/4"	5 1/2"	23# 15.5	3711' (TD)	None

Notice of Staking was Submitted: 9/7/89

Lease Description: T30N, R9W
Sec. 1, Lots 1,2,3,4, S/2 N/2, S/2

T31N, R9W
Sec. 8: all
Sec. 18: Lots 1,2,3,4, E/2 W/2, E/2
Sec. 34: all

RECEIVED
OCT 23 1989
OIL CON. DIV
DIST. ?

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 J. L. Hampton / CUB TITLE Sr. Staff Admin. Supervisor DATE 9/28/89
(This space for Federal or State office use)

PERMIT NO. _____

APPROVAL DATE _____

APPROVED
AS AMENDED

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____

OCT 19 1989

KAREA MANAGER

*See Instructions On Reverse Side