

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

30-045-28697

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 ☐
SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. NAME OF OPERATOR
McKenzie Methane Corporation 14433

3. ADDRESS OF OPERATOR
1911 Main Ave., #255, Durango, Colorado 81301

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
At surface 921' FNL, 1492' FEL
At proposed prod. zone same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
8 miles NE of Aztec, NM

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any) 921'

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 250'

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
This action is subject to technical and procedural review pursuant to 43 CFR 3165.3 and appeal pursuant to 43 CFR 3165.4.
6298' GL

PROPOSED CASING AND CEMENTING PROGRAM

5. LEASE DESIGNATION AND SERIAL NO.

NM SF 080917

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Atlantic 4-13767

9. WELL NO.

4-1

10. FIELD AND POOL, OR WILDCAT

Basin Fruitland Coal

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

Sec4-T30N-R10W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

17. NO. OF ACRES ASSIGNED TO THIS WELL

320 319.96

20. ROTARY OR CABLE TOOLS

Rotary

22. APPROX. DATE WORK WILL START*

6-15-92

DRILLING OPERATIONS AUTHORIZED ARE
SUBJECT TO COMPLIANCE WITH ATTACHED
"GENERAL REQUIREMENTS"

175-sx B (207 cu ft)
450 sx 65/35 POZ +
125 sx 50/50 POZ (983 cu ft)

RECEIVED
JUN 29 1992
OIL CON. DIV.,
DIST. 3

FORM 2800 ATTACHED AS EXISTING ACCESS RIGHT - OF - WAY

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 prevention program, if any.

21. SIGNED [Signature] TITLE Operations Manager DATE 5-14-92

(This space for Federal or State office use)

PERMIT NO. APPROVAL DATE

APPROVED BY TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
AS AMENDED

JUN 25 1992

AREA MANAGER

NMOCD

*See Instructions On Reverse Side

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator McKenzie Methane Corporation			Lease Atlantic 4		Well No. 1
Unit Letter B	Section 4	Township 30 North	Range 10 West	County San Juan	

Actual Footage Location of Well:

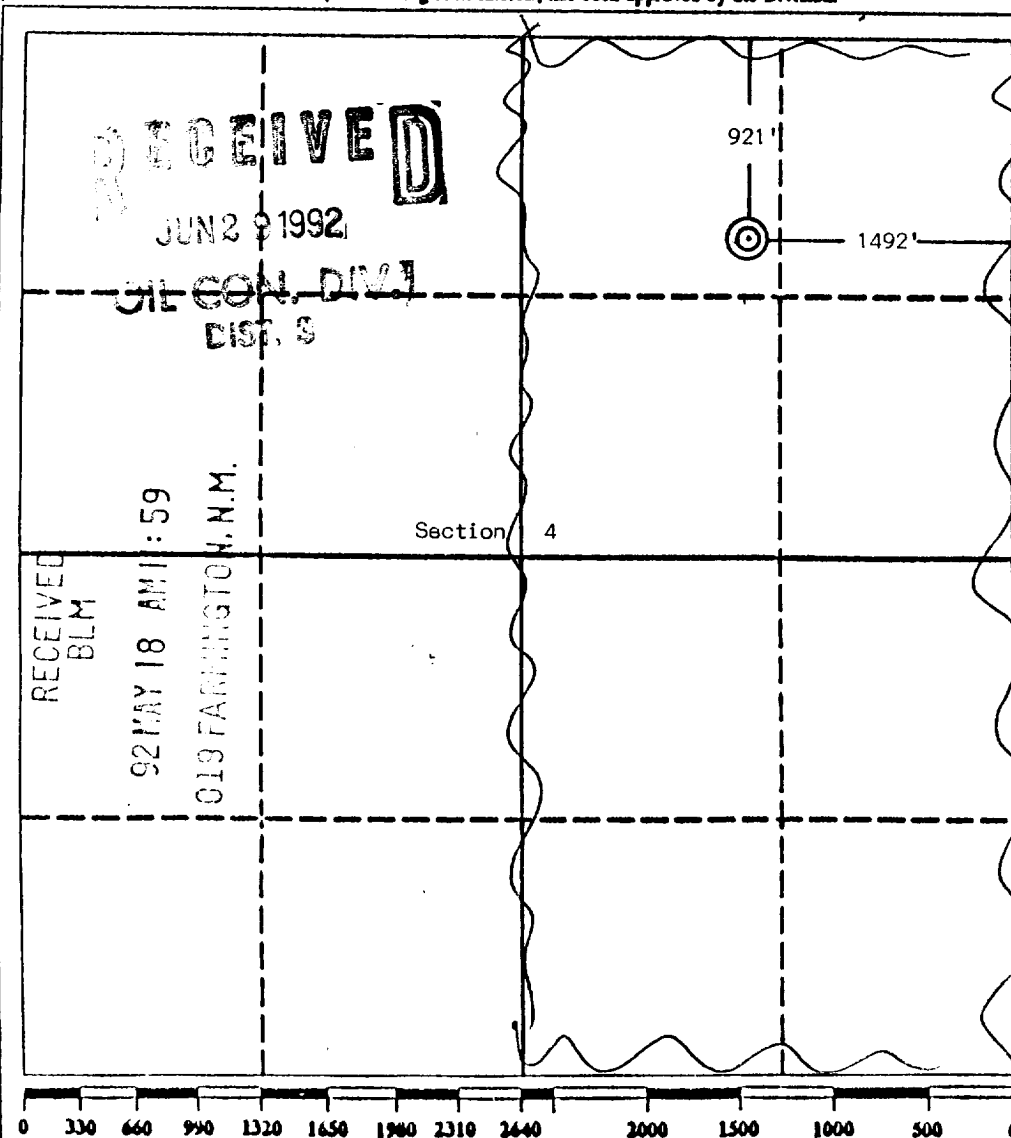
921 feet from the North line and 1492 feet from the East line

Ground level Elev. 6298 Est.	Producing Formation Fruitland Coal	Pool Basin Fruitland Coal	Dedicated Acreage: E/2 319.78 Acres
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1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?
☐ Yes ☐ No If answer is "yes" type of consolidation _____

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary).

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

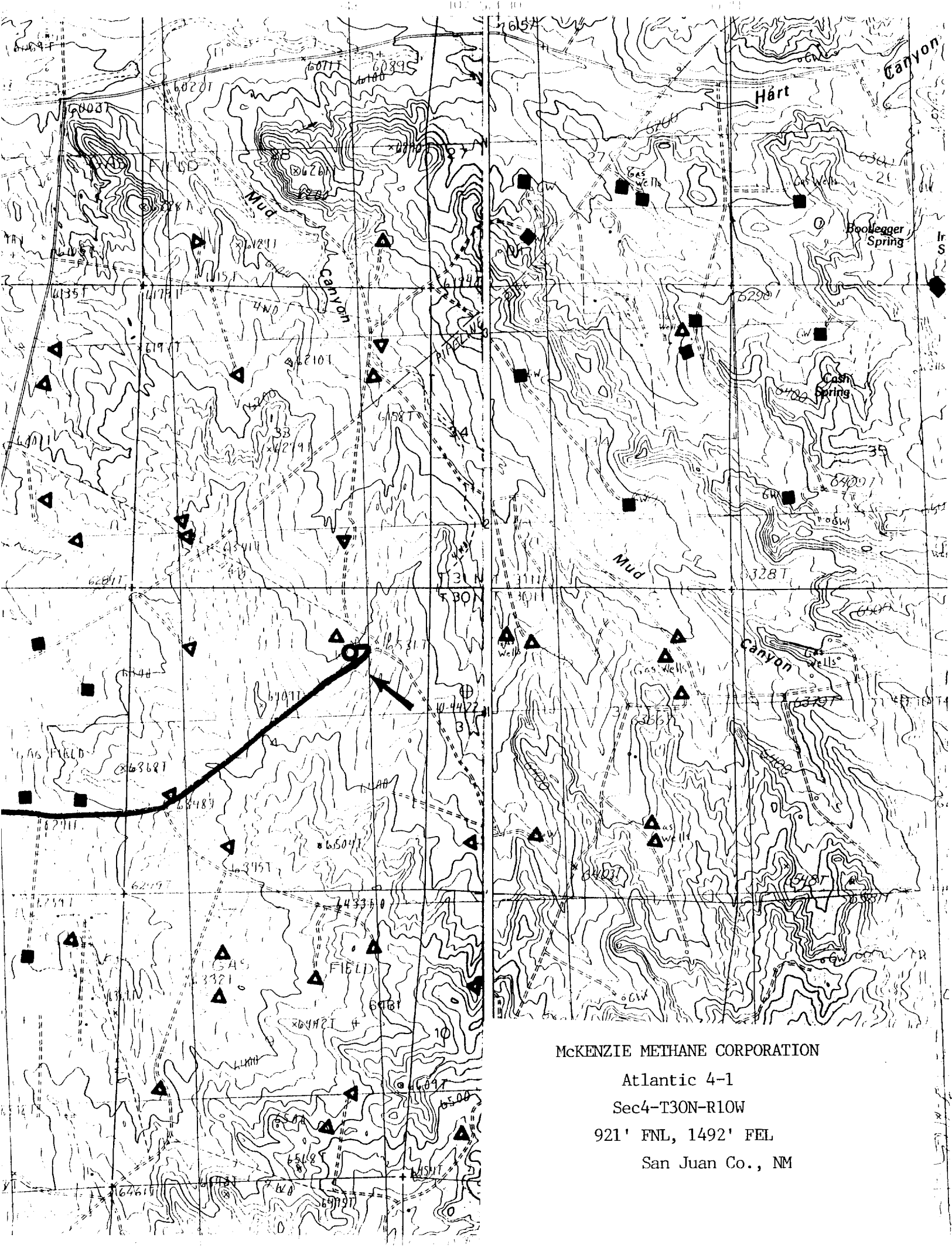
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature
R.J. Sagle
Printed Name
R.J. Sagle
Position
OPERATIONS MANAGER
Company
McKenzie Methane Corp.
Date
5-12-92

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 knowledge and belief.

Date Surveyed
April 16, 1992
Signature & Seal of Professional Surveyor
EDGAR L. RISENHOVER
Certificate No. 5979
Edgar L. Risenhoover, P.S.



McKENZIE METHANE CORPORATION

Atlantic 4-1

Sec4-T30N-R10W

921' FNL, 1492' FEL

San Juan Co., NM