

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

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

### 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**

Richardson Operating Company

**3. Address and Telephone No.**

1700 Lincoln, Suite 1700, Denver, Colorado 80203 (303) 830-8000

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

1569' FNL, 1104' FEL

Sec. 30-T30N-R14W

**5. Lease Designation and Serial No.**

NM-99003

**6. If Indian, Allottee or Tribe Name**
**7. If Unit or CA, Agreement Designation**
**8. Well Name and No.**

WF Federal 30-1

**9. API Well No.**

30-045-29598

**10. Field and Pool, or Exploratory Area**

Twin Mounds PC/Basin Fruitland Coal

**11. County or Parish, State**

San Juan County, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Surface Casing/Cementing
	<input checked="" type="checkbox"/> Other: see below
	<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 forms.)

**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 markets and zones pertinent to this work.)\*

Well re-fractured as per attached treatment report


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

Signed: Cathleen Kelly

Title: Land Manager

Date: 1/17/01

(This space for Federal or State office use)

Approved by: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Conditions of approval, if any:

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.

MAR 20 2001

Sun - OFFICE

# RICHARDSON OPERATING COMPANY

## FRACTURE TREATMENT REPORT

Operator: Richardson Operating Company Well Name: WF Federal 30-1  
Date: July 31, 2000  
Field: Basin Fruitland Coal Location: 30-30N-14W County: San Juan State: NM  
Stimulation Company: American Energy Supervisor: \_\_\_\_\_

Stage #: 2/2

Sand on location (design): 3,500 Weight ticket: 3,500 Size/type: 20/40 Brady Sand

Fluid on location: No. of Tanks: 2 Strap: 38 Amount: 760 Usable: 720

### Perforations

Depth: 874'-920' Total Holes: 80 PBTD: 1100'  
Shots per foot: 2 EHD: 0.38

### Breakdown

Acid: N/A  
Balls: N/A  
Pressure: N/A Rate: N/A

### Stimulation

ATP: 2800 AIR: 40  
MTP: 3900 MIR: 43

	Sand Stage	Pressure	Breaker test
ISIP: <u>3800</u>	pad	2100	11 cps break
5 min: <u>3600</u>	1 ppg	1900	in 33 mins.
10 min: _____	2 ppg	2800 screened out	
15 min: _____	3 ppg		
	4 ppg		

Job Complete at: 10:30 hrs. Date: 7/31/00 Start flow back: N/A

Total Fluid Pumped: 420

Total Sand Pumped: 14,600 Total Sand on Formation: 14,600

Total Nitrogen Pumped: N/A

Notes: