Form 3160-5
(June, 1990)

**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**

5. Lease Designation and Serial No.: NM-0206995
6. If Indian, Allottee or Tribe Name:
7. If Unit or CA, Agreement Designation:
8. Well Name and No.: Perf #90
9. API Well No.: 30-045-30172
10. Field and Pool, or Exploratory Area: Basin Fruitland Coal
11. County or Parish, State: San Juan Co, NM

1. Type of Well: [ ] Oil Well [X] 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): 790' FLS and 1800' FWL, Section 35-T30N-R14W

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

| TYPE OF SUBMISSION | TYPE OF ACTION | |
|---|---|---|
| [ ] Notice of Intent | [ ] Abandonment | [ ] Change of Plans |
| [X] Subsequent Report | [ ] Recompletion | [ ] New Construction |
| [ ] Final Abandonment Notice | [ ] Plugging Back | [ ] Non-Routine Fracturing |
| | [ ] Casing Repair | [ ] Water Shut-Off |
| | [ ] Altering Casing | [ ] Conversion to Injection |
| | [ ] Surface Casing/Cementing | [ ] Dispose Water |
| | [X] Other: see below | (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.)*

Well completed per attached treatment report.

JAN 2002

14. I hereby certify that the foregoing is true and correct
Signed: _____ Title: Operations Manager Date: 1-24-02
(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.

* See Instructions on Reverse Side

# RICHARDSON OPERATING COMPANY

## FRACTURE TREATMENT REPORT

Operator: Richardson Operating Company Well Name: PERF #90
Date:
Field: Basin Fruitland Coal Location: 35-T30N-R14W County: San Juan State: NM
Stimulation Company: American Energy Services Supervisor: John Durham

Stage #:

Sand on location (design): 73,360# Weight ticket: Size/type: 20/40 Brady

Fluid on location: No. of Tanks: 2 Strap: 40 Amount: 800 bbls Useable: 760

**Perforations**

Depth: 1082' - 1096' Total Holes: PBTD:

Shots per foot: EHD: .42"

**Breakdown**

Acid: 500 gals

Balls: None

Pressure: 1400 Rate: 5.0 bm=pm

**Stimulation**

ATP: 1600# AIR: 33

MTP: 1830# MIR: 33

ISIP: 730
5 min: 672
10 min: 650
15 min: 650

| Sand Stage | Pressure |
|---|---|
| pad | 1638 |
| 1 ppg | 1606 |
| 2 ppg | 1850 |
| 3 ppg | 1650 |
| 4 ppg | 1560 |

Breaker test

Job Complete at: 10.07 hrs. Date: 5/9/01 Start flow back:

Total Fluid Pumped: 733

Total Sand Pumped: 73,360# Total Sand on Formation: 72,800#

Total Nitrogen Pumped: None

Notes:

1116