



IN REPLY REFER TO:

# United States Department of the Interior

BUREAU OF INDIAN AFFAIRS

~~XXXXXXXXXXXX~~

NAVAJO REGION

P.O. Box 1060

Gallup, New Mexico 87305-1060

RRES/543

AUG 17 2000



New Mexico Energy  
Attn: Charley Perrin  
Minerals & Natural Resources Department  
Aztec District Office  
1000 Rio Brazos Road  
Aztec, New Mexico 87410

Dear Mr. Perrin:

This is to confirm the discussion that was held at the quarterly meeting held in Farmington on July 13, 2000, with the Bureau of Indian Affairs (BIA), Bureau of Land Management (BLM) and the Navajo Nation Minerals Department on collecting on the bond of APA Development Co. in the amount of \$75,000. The irrevocable letter of credit was issued by Valley National Bank in lieu of a collective bond.

You explained to Ms. Bertha Spencer, Realty Specialist, that BLM will be meeting with the New Mexico Oil Conservation Division (NMOCD) on August 15, 2000 to request the NMOCD to provide additional funds to plug the wells on Navajo Tribal Lease Nos. 14-20-600-3540 and 14-20-603-5013. Also, BLM Farmington Field Office has advised you on the inventory that was taken and submitted to your office.

We have written to Valley National Bank of Cortez, Colorado to demand payment of \$75,000 against APA Development, Inc.'s Irrevocable Letter of Credit which will go towards the plugging costs. If NMOCD is willing to bear the additional costs of plugging the wells, we will assist them with \$75,000 to offset with the expenses.

We will await word from the bank before advising you further. We appreciate your assistance in this matter and any cooperation from NMOCD will be greatly appreciated. If you have any questions, please contact Ms. Bertha Spencer, at (520) 871-5938.

Sincerely,

ACTING

Regional Director, Navajo

BEFORE EXAMINER STOGNER	
OIL CONSERVATION DIVISION	
OCD	EXHIBIT NO. 1
CASE NO.	12494



IN REPLY REFER TO:

# United States Department of the Interior

BUREAU OF INDIAN AFFAIRS

~~Navajo Region~~

NAVAJO REGION

P.O. Box 1060

Gallup, New Mexico 87305-1060

RRES/543

AUG 17 2000

**CERTIFIED MAIL - RETURN RECEIPT REQUESTED**

Valley National Bank of Cortez  
350 West Montezuma Avenue  
Cortez, CO 81321

Dear Sir:

This letter concerns Irrevocable Letter of Credit Nos. 191 and 192 dated February 25, 1994, showing the Valley National Bank of Cortez, CO., as surety and APA Development, Inc. P.O. Box 215, Cortez, CO. 81321, as principal. Copies of the Irrevocable Letter of Credit (LOC) bonds are enclosed for your information.

Bureau of Land Management, Farmington Field Office notified our office by letter dated September 8, 1998, requesting us to demand payment on the surety bond because of APA Development Co.'s continued noncompliance on Navajo Tribal Lease Nos. 14-20-600-3540 and 14-20-603-5013. The LOC bond was accepted to insure performance of the leases. APA Development Co. is lessee of record on both leases and is the responsible party for the abandonment of wells.

Accordingly, we are requesting Valley National Bank of Cortez to make payment on the two (2) Letters of Credit on file with the Bureau of Indian Affairs to pay for the proper plugging of the wells. The total bond amount is \$75,000. Please make your check payable to the "Bureau of Indian Affairs", Navajo Region Office, Attn: Real Estate Services, P.O. Box 1060, Gallup, New Mexico 87305-1060.

If you have any questions, please contact Ms. Bertha Spencer, Realty Specialist at (520) 871-5938.

Sincerely,

/S/ OMAR C. BRADLEY

**ACTING** Regional Director, Navajo

Enclosures

cc: BLM, Farmington Field Office  
Navajo Nation, Minerals Department  
NM Energy, Minerals & Nat. Res. Department, Attn: Charley Perrin,  
Aztec District Office, 1000 Rio Brazos Road, Aztec, NM 87410 ✓  
APA Development, Inc., POB 215, Cortez, CO 81321





# NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON  
Governor  
Jennifer A. Salisbury  
Cabinet Secretary

Lori Wrotenbery  
Director  
Oil Conservation Division

August 30, 2000

## CERTIFIED MAIL RETURN RECEIPT REQUESTED

A.P.A. Development, Inc.  
Post Office Box 215  
Cortez, CO 81321

### Re: Case No. 12494

Application of the New Mexico Oil Conservation Division for an order requiring  
A.P.A. Development, Inc. to plug twenty wells in San Juan County, New Mexico

This letter is to advise you that the New Mexico Oil Conservation Division has filed the enclosed application for a hearing requiring A.P.A. Development, Inc. and other interested parties to appear and show cause why certain wells should not be ordered plugged and abandoned.

This application has been set for hearing before an Examiner of the Oil Conservation Division on September 21, 2000. You are not required to attend this hearing, but as owner of an interest that may be affected by an order issued in this case, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 1208.B, enclosed, to file a Prehearing Statement three days in advance of the hearing.

Best regards,

Marilyn S. Hebert  
Attorney

c: Frank Chavez, District Supervisor  
Charlie Perrin, OCD Aztec  
Omar C. Bradley, Acting Regional Director, BLM  
BLM, Farmington Field Office

BEFORE EXAMINER STOGNER	
OIL CONSERVATION DIVISION	
OCD	EXHIBIT NO. 2
CASE NO.	12494

**STATE OF NEW MEXICO  
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION**

**APPLICATION OF THE NEW MEXICO OIL CONSERVATION DIVISION  
THROUGH THE SUPERVISOR OF DISTRICT III FOR AN ORDER REQUIRING  
A. P. A. DEVELOPMENT, INC. TO PROPERLY PLUG TWENTY WELLS IN SAN  
JUAN COUNTY, NEW MEXICO, AUTHORIZING THE DIVISION TO PLUG SAID  
WELLS, AND ORDERING A FORFEITURE OF THE PLUGGING BOND, IF ANY.**

**CASE NO.** 12494

**APPLICATION FOR PLUGGING AND FORFEITURE OF BOND**

1. A. P. A. Development, Inc. ("Operator") is the operator of the following wells in San Juan County, New Mexico:
  - a) Navajo "M" Well No. 1 located 330' from the South line and 330' from the West line in Unit M of Section 33, Township 32 North, Range 17 West;
  - b) Navajo "M" Well No. 2 located 1980' from the South line and 1989' from the West line in Unit K of Section 33, Township 32 North, Range 17 West;
  - c) Navajo "M" Well No. 8 located 1980' from the North line and 775' from the East line in Unit H of Section 34, Township 32 North, Range 17 West;
  - d) Navajo "M" Well No. 9 located 660' from the North line and 660' from the East line in Unit A of Section 34, Township 32 North, Range 17 West;
  - e) Navajo "M" Well No. 10 located 2130' from the South line and 510' from the East line in Unit I of Section 34, Township 32 North, Range 17 West;
  - f) Navajo "M" Well No. 11 located 1720' from the North line and 1750 from the East line in Unit G of Section 34, Township 32 North, Range 17 West;

- g) Navajo "P" Well No. 1 located 1950' from the North line and 610' from the West line in Unit E of Section 35, Township 32 North, Range 17 West'
- h) Navajo "P" Well No. 2 located 1920' from the South line and 1810' from the West line in Unit K of Section 35, Township 32 North, Range 17 West;
- i) Navajo "P" Well No. 3 located 580' from the South line and 2215' from the East line in Unit O of Section 35, Township 32 North, Range 17 West;
- j) Navajo "P" Well No. 4 located 1980' from the South line and 660' from the West line in Unit L of Section 35, Township 32 North, Range 17 West;
- k) Navajo "P" Well No. 5 located 660' from the South line and 1980' from the West line in Unit N of Section 35, Township 32 North, Range 17 West;
- l) Navajo "P" Well No. 6 located 660' from the South line and 660' from the East line in Unit P of Section 35, Township 32 North, Range 17 West;
- m) Navajo "P" Well No. 7 located 1980' from the South line and 1980' from the East line in Unit J of Section 35, Township 32 North, Range 17 West;
- n) Navajo "P" Well No. 8 located 660' from the South line and 660' from the West line in Unit M of Section 35, Township 32 North, Range 17 West;
- o) Navajo "P" Well No. 9 located 1980' from the North line and 1980' from the West line in Unit F of Section 35, Township 32 North, Range 17 West;
- p) Navajo "P" Well No. 10 located 1980' from the South line and 660' from the West line in Unit L of Section 26, Township 32 North, Range 17 West;
- q) Navajo "P" Well No. 11 located 810' from the North line and 510' from the West line in Unit D of Section 35, Township 32 North, Range 17 West;

- r) Navajo "P" Well No. 12 located 1830' from the South line and 810' from the East line in Unit I of Section 35, Township 32 North, Range 17 West;
- s) Navajo "P" Well No. 14 located 650' from the North line and 640' from the West line in Unit D of Section 35, Township 32 North, Range 17 West; and
- t) Navajo "P" Well No 19 located 1450' from the South line and 1980' from the West line in Unit K of Section 26, Township 32 North, Range 17 West.

2. The subject wells have not produced hydrocarbon or carbon dioxide substance or have otherwise been inactive for more than one year or are no longer usable for beneficial purposes and no permit for temporary abandonment has been requested by the Operator or approved by the Division.

3. By virtue of the failure to use the wells for beneficial purposes or to have approved a current temporary abandonment permits, the wells are presumed to have been abandoned and are required to be plugged.

4. By authority of NMSA 1978, § 70-2-14 the Rules of the Division require wells that are inactive for more than one year or are no longer usable for beneficial purposes to be properly plugged.

5. Demand has been made or attempted to be made upon the Operator either to place the subject wells to beneficial use, obtain approval for temporary abandonment or properly plug and abandon the same, and the Operator has failed to do so.

WHEREFORE, the Supervisor of District III of the Oil Conservation Division applies to the Director to enter an order:

A. Determining whether the wells should be plugged in accordance with a Division-approved plugging program.

B. Upon a determination that the wells should be plugged, directing Operator to plug the wells.

C. Further ordering that if Operator fails to plug and abandon the wells as ordered by the Director, that the Division be authorized: i. to plug the wells; ii. to declare forfeit on the bond, if any, and to take such action to foreclose on the bond; and iii. to recover from the Operator any costs of plugging the wells in excess of the amount of the bond, if any.

D. For such other and further relief as the Division deems just and proper, including the assessment of fines.

RESPECTFULLY SUBMITTED,

A handwritten signature in black ink, appearing to read 'Marilyn S. Hebert', is written over the typed name.

Marilyn S. Hebert, Attorney  
New Mexico Oil Conservation Division  
2040 South Pacheco  
Santa Fe, NM 87505  
(505) 827-8156

(10) This paragraph has been moved and renumbered to 19 NMAC 15.N.1207.A.(7). [1-1-86...2-1-96; A, 7-15-99]

(11) This paragraph has been moved and renumbered to 19 NMAC 15.N.1207.A.(8). [1-1-86...2-1-96; A, 7-15-99]

**1207.B. Type and Content of Notice.** Any notice required by this rule shall be sent by certified mail, return receipt requested, to the last known address of the person to whom notice is to be given at least 20 days prior to the date of hearing of the application and shall include: a copy of the application; the date, time and place of the hearing; and the means by which protests may be made. [1-1-86...2-1-96; A, 7-15-99]

**1207.C.** At the hearing, the applicant shall make a record, either by testimony or affidavit signed by the applicant or its authorized representative, that: (a) the notice provisions of this rule have been complied with; (b) the applicant has conducted a good-faith diligent effort to find the correct address of all persons entitled to notice; and (c) pursuant to this rule, notice has been given at that correct address as required by this rule. In addition, the record shall contain the name and address of each person to whom notice was sent and, where proof of receipt is available, a copy of the proof. [1-1-86...2-1-96; A, 7-15-99]

**1207.D.** Evidence of failure to provide notice as required in this rule may, upon proper showing, be considered cause for reopening the case. [1-1-86...2-1-96; A, 7-15-99]

**1207.E.** In the case of an administrative application where the required notice was sent and a timely filed protest was made, the Division shall notify the applicant and the protesting party in writing that the case has been set for hearing and the date of the hearing. No further notice is required. [7-15-99]

## **1208 PLEADINGS: COPIES [9-15-55...2-1-96; A, 7-15-99]**

**1208.A.** For pleadings and correspondence filed in cases pending before a Division Examiner, two copies must be filed with the Division. For pleadings and correspondence filed in cases pending before the Commission, five copies must be filed with the Division. The Division will disseminate copies to the members of the Commission. The party filing the pleading or correspondence shall at the same time either hand deliver or transmit by facsimile or electronic mail to any party who has entered an appearance therein or the attorneys of record, a copy of the pleading or correspondence. An appearance of any interested party shall be made either by letter addressed to the Division or in person at any proceeding before the Commission or before a Division Examiner, with notice of such appearance to the parties of record. [9-15-55...2-1-96; A, 7-15-99]

**1208.B.** Parties to an adjudicatory proceeding must file a prehearing statement three days in advance of a scheduled hearing before the Division or the Commission. The statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing. [7-15-99]

Z 559 572 928

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to A.P.A. Development, Inc.	
Street & Number P.O. Box 215	
Post Office, State, & ZIP Code Cortez, CO 81321	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

Fold at line over top of envelope to the right of the return address.

**CERTIFIED**

Z 559 572 928

**MAIL**

Thank you for using Return Receipt Service.

<b>SENDER:</b> Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: A.P.A. Development, Inc. P.O. Box 215 Cortez, CO 81321		4a. Article Number Z559 572 928	4b. Service Type <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD
5. Received By: (Print Name)		7. Date of Delivery	
6. Signature: (Addressee or Agent) X		8. Addressee's Address (Only if requested and fee is paid)	

Is your RETURN ADDRESS completed on the reverse side?

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

Z 559 572 728

2P

US Postal Service  
**Receipt for Certified Mail**

No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

Sent to A.P.A. Development, Inc.	
Street & Number P.O. Box 215	
Post Office, State, & ZIP Code Cortez, CO 81321	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995



State of New Mexico  
**ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT**

2040 South Pacheco  
P.O. Box 6429  
Santa Fe, New Mexico 87505-5529

SEP - 1

cc

Fold at line over top of envelope to  
the right of the return address

**CERTIFIED**

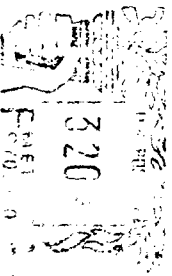
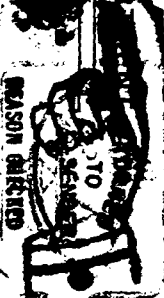
2 559 522 928

**MAIL**



A.P.A. Development, Inc.  
Post Office Box 215  
Cortez, CO 81321

Reasons for return:  
Insufficient Address \_\_\_\_\_  
No such street \_\_\_\_\_  
No such office in state \_\_\_\_\_  
No return address \_\_\_\_\_  
No return to this address \_\_\_\_\_



First Notice 9/2  
Second Notice 7  
Returned



7.25.2000

APA Development  
NAVAJO M#1  
M-33-32N 17W  
330S 330W.  
45-11143

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

5. Lease Designation and Serial No.  
**14-20-603-5013**

6. If Indian, Allottee or Tribe Name

**Navajo Tribe**

7. If Unit or CA, Agreement Designation

8. Well Name and No.

**1 Navajo M**

9. API Well No.

**30045 11143**

10. Field and Pool, or Exploratory Area

11. County or Parish, State

**San Juan, NM**

**SUBMIT IN TRIPLICATE**

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator **AAA Development**

**% NMOCO**

3. Address and Telephone No.

**1000 Rio Bragos Rd. Aztec NM 87410 334-6178**

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

**33-32N-17W 330/S-330/W**

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 \_\_\_\_\_

- ☐ 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.)\*

**See attached plugging procedure.**

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

Signed **NMOCO Contract Plugging**

Date **8/11/00**

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_

Date **8/17/00**

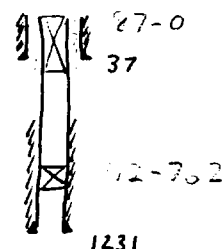
Conditions of approval, if any:

**API NUMBER** 30-045-11143  
**OPERATOR NAME** APA DEVELOPMENT CORP  
**PROPERTY NAME** NAVAJO M  
**SECTION 33** TOWNSHIP 32N RANGE 17W  
**FOOTAGE** 330 FSL 330 FWL UL "M"

Sur Csg OD	NA HOLE	8 5/8	XX	XX	XX	XX
SUR CSG TD		37	XX	XX	XX	XX
SUR CSG WT		28	XX	XX	XX	XX
TOP OF CMT		0	XX	XX	XX	XX
ACTUAL			XX	XX	XX	XX
CACULATED		11SX	XX	XX	XX	XX
PROD CSG OD	6 3/4	5	XX	XX	XX	XX
PROD CSG TD		1231	XX	XX	XX	XX
PROD CSG WT		11.5	XX	XX	XX	XX
TOP OF CMT			XX	XX	XX	XX
FORMATION TOP	ACTUAL	EST		XX	XX	
GALLUP 1042'	CACULATED	75SX		XX	XX	
86 2	PERF TOP	1156		XX	XX	
	PERF BOTTOM	1172		XX	XX	
	PACKER			XX	XX	
	TYPE OF PLUG			XX	XX	
	CIBP & CMT			XX	XX	
	CMT			XX	XX	

### PROPOSED PLUGGING OPERATION

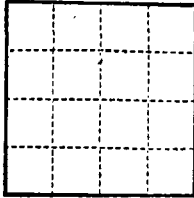
MIRU PU, BOPE, TOOH W/ RODS AND TUBING, PICK UP WORK STRING, CIRC HOLE  
 SPOT 16 SX @ 1120-970 WOC, TAG, TOP AS REQUIRED,  
 RIH PERF @ 87' CIRC TO SURFACE LEAVE CASING FULL EST 12 SX  
 CUTOFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS,  
 Close pits according to guidelines: Clean and level location



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency Navajo  
Tribal Navajo  
Allottee Navajo  
Lease No. 14-22-423-2013



SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL.....	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF.....	
NOTICE OF INTENTION TO CHANGE PLANS.....		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.....	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.....		SUBSEQUENT REPORT OF ALTERING CASING.....	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL.....		SUBSEQUENT REPORT OF REDRILLING OR REPAIR.....	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE.....		SUBSEQUENT REPORT OF ABANDONMENT.....	
NOTICE OF INTENTION TO PULL OR ALTER CASING.....		SUPPLEMENTARY WELL HISTORY.....	MAY 7 1959
NOTICE OF INTENTION TO ABANDON WELL.....			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

May 7, 1959

Well No. 1 is located 330 ft. from S line and 330 ft. from W line of sec. 36  
N. 1/4 Section 36 2N 17W N. 1/4 Sec. 36  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Gallop Creek (Gallop Res.) San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is ..... ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 1 to approximately 1300' to test the Gallop formation. Our casing program is as follows:

25' of 8-1/8" OD casing, cemented with 25 sacks regular cement, to be circulated.  
1300' of 5" OD casing, to be cemented with 75 sacks cement.

The designated drilling unit is the N. 1/4-S. 1/4 of Section 36-2N-17W San Juan County, New Mexico.

ILLEGIBLE

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

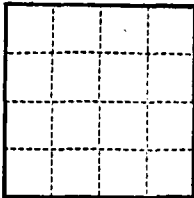
Company SKELLY OIL COMPANY  
Address Box 426  
Farmington, New Mexico

By SKelly  
Title District Clerk

(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency Navajo  
Allottee Navajo  
Lease No. 24-02-400-200



SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL		

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

May 12, 1959

Well No. 2 is located 300 ft. from S line and 300 ft. from W line of sec. 30

24/4 Section 30 24E 17N N.M.P.M.  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Chinle Formation (Gallup Nat.) San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5200 ft.

MAY 13 1959

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

**REMARKS:** 3:00 P.M., May 8, 1959.

Run & set 8-1/2" casing at 37' & cemented w/11 lbs. reg. cement, 25 cu.ft. Cemented by hand.

ILLEGIBLE

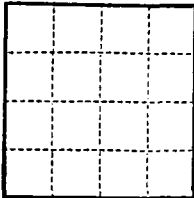


I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY  
Box 426  
Address Farmington, New Mexico

By (Signed) P. E. Cosper

Title District Superintendent



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Budget Bureau No. 42-R350.4  
Approval expires 12-31-60.

Indian Agency Navajo  
Tribal  
Allottee Navajo  
Lease No. 14-80-409-9019

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL.....	SUBSEQUENT REPORT OF WATER SHUT-OFF.....
NOTICE OF INTENTION TO CHANGE PLANS.....	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.....
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.....	SUBSEQUENT REPORT OF ALTERING CASING.....
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL.....	SUBSEQUENT REPORT OF REDRILLING OR REPAIR.....
NOTICE OF INTENTION TO SHOOT OR ACIDIZE.....	SUBSEQUENT REPORT OF ABANDONMENT.....
NOTICE OF INTENTION TO PULL OR ALTER CASING.....	SUPPLEMENTARY WELL HISTORY.....
NOTICE OF INTENTION TO ABANDON WELL.....	Report of Perforations.....
	Report of Sand/Oil Fracing.....

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

MAY 19 1959

ILLEGIBLE

MAY 18 1959

Navajo  
Well No. 1 is located 330 ft. from S line and 330 ft. from W line of sec. 33  
SW 1/4 Section 33 33N 17W N.M.P.M.  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Chinle Rock ( Gallup Nat.) San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5390 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Run & set 5" OD casing at 1231' & cemented with 50 lbs. reg. cement. Plug down 2:00 A.M., 5/12/59. Pumped plug down w/200 gals. Halliburton 7 1/2 MCA acid & 825 gals. crude oil.

Run temperature survey & found top of cement behind 5" casing at 647'.

Perforated 5" casing w/4 McGullough glass jets per ft. 1156-72'. Total of 16', 64 holes.

Frased Gallup formation, down 5" OD casing, thru 5" casing perfor. 1156-72' w/30,000# 20/40 sand & 17,514 gals. crude oil by Halliburton. BHP 2000#, Max. TP 1500#, Min. TP 1200#, inj. rate 29 BPM. Time of treatment 17 min. Flushed w/2100 gals. crude oil. The 200 gals. Halliburton MCA acid, used to pump plug down, was pumped ahead of frace job. Standing pressure 900# in 5 min. 800#.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY  
Address Box 426  
Farmington, New Mexico

By (Signed) P. E. Cosper  
Title District Superintendent

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico

May 29, 1959

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company

(Company or Operator)

Navajo "M"

(Lease)

Well No. 1, in SW 1/4 SW 1/4,

M

Sec. 33

T. 32N

R. 17W

NMPM, Chimney Rock (Gallup Ext.) Pool

Unit Letter

San Juan

County. Date Spudded May 8, 1959

Date Drilling Completed

May 11, 1959

Please indicate location:

Elevation 5350' D.P. Total Depth 1252' PBD 1229'

Top Oil/Pay 1156' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1156-72', total 16', 64 holes

Open Hole none Depth 1231' Casing Shoe 1202' Depth 1202'

OIL WELL TEST -

Natural Prod. Test: bbls. oil, bbls water in hrs, min. Size Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 78 bbls. oil, no bbls water in 24 hrs, no min. Size Pump

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 30,000# 20/40 Sand, 17,514 gals. crude oil by Halliburton

Casing Tubing Date first new Press. oil run to tanks May 21, 1959

Oil Transporter McWood Corporation

Gas Transporter

Remarks:

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUN 2 1959, 19.

SKELLY OIL COMPANY

(Company or Operator)

(Signed) P. E. Cosper

By: (Signature)

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold  
Supervisor Dist. # 3

Title: District Superintendent

Send Communications regarding well to:

SKELLY OIL COMPANY

Name: Box 401

Address: Farmington, New Mexico



NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

Form C-110  
Revised 7/1/55

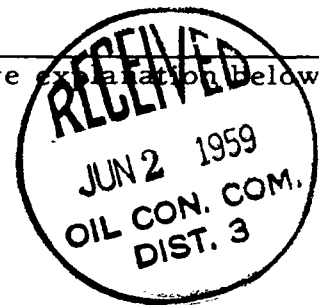
(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Shelly Oil Company Lease Navajo "H"  
Well No. 1 Unit Letter H S 33 T 32N R 17W Pool Chimney Rock (Gallup Ext.)  
County San Juan Kind of Lease (State, Fed. or Patented) Federal  
If well produces oil or condensate, give location of tanks: Unit 0 S 33 T 32N R 17W  
Authorized Transporter of Oil or Condensate McLeod Corporation  
Address 330 Petroleum Building, Abilene, Texas  
(Give address to which approved copy of this form is to be sent)  
Authorized Transporter of Gas \_\_\_\_\_  
Address \_\_\_\_\_  
(Give address to which approved copy of this form is to be sent)  
If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well Navajo "H" No. 1 (x)  
Change in Transporter of (Check One): Oil ( ) Dry Gas ( ) C'head ( ) Condensate ( )  
Change in Ownership \_\_\_\_\_ ( ) Other \_\_\_\_\_ ( )  
Remarks: \_\_\_\_\_ (Give explanation below)

ILLEGIBLE



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 29th day of May 19 59

By (Signed) P. E. Gosper

Approved JUN 2 1959 19

Title District Superintendent

OIL CONSERVATION COMMISSION  
Original Signed Emery C. Arnold

Company \_\_\_\_\_  
Address Farmington, New Mexico

By \_\_\_\_\_

Title Supervisor Dist. # 3

NEW MEXICO OIL CONSERVATION COMMISSION

BOX 871

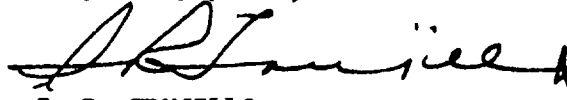
SANTA FE, NEW MEXICO  
January 6, 1961

Skelly Oil Company  
Drawer 510  
Farmington, New Mexico

Gentlemen:

As of this date this office has not received Operator's Monthly Report, Form C-115 for the month of November 1960, for your well (s) in the Horseshoe Canyon Gallup Pool, as listed below. We wish to remind you that these reports should be in this office by the 24th day of each month. Repeated delinquent reports may result in cancellation of allowables.

Very truly yours,



I. R. TRUJILLO,  
Administrative Assistant

IRT/lj

1 M 33-32-17 Navajo M

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

cc: Hobbs, New Mexico



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OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease

Fed. ☒ Indian Fee ☐

5. State Oil & Gas Lease No.

Fed. Cont # 14-20-603-

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Skelly Oil Company	8. Farm or Lease Name Navajo "M"
3. Address of Operator 330 So. Center-Rm. 208, Casper, WY 82601	9. Well No. 1
4. Location of Well UNIT LETTER M, 330 FEET FROM THE S LINE AND 330 FEET FROM THE W LINE, SECTION 33 TOWNSHIP 32N RANGE 17W NMPM.	10. Field and Pool, or Wildcat Horseshoe Gallup
15. Elevation (Show whether DF, RT, GR, etc.) 5350 DF	12. County San Juan

16.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☒ 4/1/71

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CHANGE PLANS ☐

CASING TEST AND CEMENT JOBS ☐

OTHER ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

This well is no longer economically productive and is under study for improvement of its productive capacity.

Permission is requested for continuation of TA status for at least one year pending proper implementation of remedial work.

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

SIGNED R. M. Whitaker

TITLE Area Superintendent

DATE 10/30/74

APPROVED BY Original Signature

TITLE Area Superintendent

DATE NOV 7 1974

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Cont. 14-20-603-5013	
2. NAME OF OPERATOR Skelly Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
3. ADDRESS OF OPERATOR Box 3360, Casper, WY 82602		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FSL & 330' FWL SW/4 SW/4		8. FARM OR LEASE NAME Navajo "M"	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5350' DF		10. FIELD AND POOL, OR WILDCAT Horseshoe-Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 33-T32N-R17W	
		12. COUNTY OR PARISH San Juan	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) <input type="checkbox"/> Temporarily Abandon	(Other) <input checked="" type="checkbox"/> X	(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 pertinent to this work.)\*

This well will no longer produce from the Gallup zone and a study is being made of the lease for possible recompletions in other zones.

Permission is requested for continuation of TA status for one more year.

TEMPORARY ABANDONMENT  
EXPIRES

JUN 1 1977

18. I hereby certify that the foregoing is true and correct  
SIGNED Ray J. McWhorter TITLE Area Superintendent DATE 6/11/76  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
**A.P.A. Development Corporation**

Address  
**P.O. Box 215, Cortez, Colorado 81321**

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name and address of previous owner **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "M"</b>	Well No. <b>1</b>	Pool Name, including Formation <b>Many Rocks Hershoo Gallup</b>	Kind of Lease <b>Navajo</b>	Lease No. <b>14-20-603-5013</b>
Location Unit Letter <b>M</b> : <b>330</b> Feet From The <b>South</b> Line and <b>330</b> Feet From The <b>West</b> Line of Section <b>33</b> Township <b>32N</b> Range <b>17W</b> NMPM, <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Giant Refinery Cienega Pipeline</b>	Address (Give address to which approved copy of this form is to be sent) <b>5107 N. 7th St., Phoenix, AZ 85014</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<b>G 33 32N 17W</b>	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

**Patrick B. Woolley**  
(Signature)  
**Operator**  
(Title)  
**10-12-88**  
(Date)

OIL CONSERVATION DIVISION

APPROVED **OCT 17 1988**, 19  
BY **[Signature]**  
TITLE **SUPERVISION DISTRICT #3**

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

## BUREAU OF LAND MANAGEMENT

## 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-5013
2. NAME OF OPERATOR A.P.A. Development Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR Box 215 Cortez CO. 81321		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 330' FSL 330' FWL Sec 33 T32N R17W		8. FARM OR LEASE NAME Navajo "M"
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DP, RT, GR, etc.)		10. FIELD AND POOL, OR WILDCAT Many Rocks 6A1
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA Sec 33 T32N R17W
		12. COUNTY OR PARISH San Juan
		13. STATE NM

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

## NOTICE OF INTENTION TO:

## SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐PULL OR ALTER CASING ☐WATER SHUT-OFF ☐REPAIRING WELL ☐FRACTURE TREAT ☐MULTIPLE COMPLETION ☐FRACTURE TREATMENT ☐ALTERING CASING ☐SHOOT OR ACIDIZE ☐ABANDON\* ☐SHOOTING OR ACIDIZING ☐ABANDONMENT\* ☐REPAIR WELL ☐CHANGE PLANT ☐(Other) ☐

(Other) Produce

(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 pertinent to this work.)

Plan to put well back on production. by August 92.

RECEIVED

MAR 27 1992

OIL CON. DIV.  
DIST. 3

019 FARMINGTON, N.M.

RECEIVED  
BLM

92 MAR 17 PM 1:57

THIS APPROVAL EXPIRES **SEP 01 1992**

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

SIGNED

Pat Woolley

TITLE

DATE

3/13/92

(This space for Federal or State office use)

APPROVED

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

MAR 26 1992

AREA MANAGER

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

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

SUNDRY NOTICES AND REPORTS ON WELLS

07:13:17 PM 2:48

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.

FARMINGTON, NM

SUBMIT IN TRIPLICATE

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
APA Development, Inc.

3. Address and Telephone No.  
P.O. Box 1093 Shiprock, NM 87420

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
33015-W 33 T. 32N., R. 17W.  
m

5. Lease Designation and Serial No.

14-20-603-5013

6. If Indian, Allottee or Tribe Name

Navajo Tribal

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Navajo M#1

9. API Well No.

3004511143

10. Field and Pool, or Exploratory Area

Many Rocks

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 \_\_\_\_\_
- ☐ 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.)\*

The subject well was returned to production 3, 12, 1997  
and is currently producing 4 1/4 BOPD.

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

Signed William E. Dwyer Title Pres

Date 3-17-97

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

ACCEPTED FOR RECORD

Date \_\_\_\_\_

MAR 13 1997

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

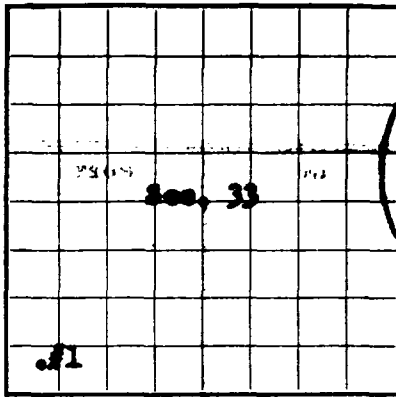
\*See Instruction on Reverse Side

BY \_\_\_\_\_

NMOCD

Form 9-530

ILLEGIBLE

Budget Bureau No. 43-B255.4.  
Approval expires 12-31-60.U. S. LAND OFFICE Navajo TribalSERIAL NUMBER 14-20-603-5013LEASE OR PERMIT TO PROSPECT Navajo "H"

LOCATE WELL CORRECTLY

RECEIVED

JUN 2 1959  
OIL CON. COM.  
DIST. 3

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

## LOG OF OIL OR GAS WELL

Company Skelly Oil Company Address Box 426 - Farmington, New MexicoLessor or Tract Navajo "H" Field Chimney Rock State New MexicoWell No. 1 Sec. 33 T. 32N R. 17W Meridian N.M.P.M. County San JuanLocation 330 ft. N. of 8 Line and 330 ft. E. of W Line of Section 33 Elevation 5350'  
(Derriek floor relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Signed (Signed) P. E. CosperDate May 29, 1959 Title District Superintendent

The summary on this page is for the condition of the well at above date.

Commenced drilling May 8, 1959 Finished drilling May 11, 1959

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1156 to 1172 No. 4, from \_\_\_\_\_ to \_\_\_\_\_

No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_

No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from none to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_

No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
8-5/8"	37	11					1156	1172	Production

## HISTORY OF OIL OR GAS WELL

10-23004-3 R. S. COLEMAN JR. BRINKLEY OIL CO.

ILLEGIBLE

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
8-5/8"	37	11	cement by hand		
5"	1231	50	Kaliburton		

## PLUGS AND ADAPTERS

Heaving plug—Material \_\_\_\_\_ Length \_\_\_\_\_ Depth set \_\_\_\_\_

OLD MARK



## SHOOTING RECORD

Shot	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
------	------------	----------------	----------	------	------------	-------------------

Freeed down 3" casing, then 5" casing. Per 15. 1196-72 w/30,000 20/40 sand & 17,514 gals. crude oil by Halliburton. TP 1200, Min. TP 1200, Max. rate 29 BPM. Time of treatment 17 min. Flashed w/100 gals. water. The 200 gals. Halliburton 200 sand, used to plug down, was pumped ahead of time. In 5 min. 8000.

Rotary tools were used from 0 feet to 1252 feet, and from feet to feet

Cable tools were used from feet to feet, and from feet to feet

HISTORY OF OIL OR GAS WELL

It is of the greatest importance to keep a complete history of the well producing with the reason for the work and the date. If data were any changes made in the well, give the date and location. If the well has been abandoned, give the date of shut-in. The production for the first 24 hours was 99.2% oil, 0.8% gas, and 0% water.

emulsion; 0% water; and 0% sediment.

Gravity, °Bé. 39.3

If gas well, cu. ft. per 24 hours

Gallons gasoline per 1,000 cu. ft. of gas

Rock pressure, lbs. per sq. in.

## EMPLOYEES

Well Completions, Inc.

Driller

Driller

Driller

Driller

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	1042	1042	Sand and Shale
1042	1154	112	Sand and Shale - Top Lower Gallup 1042'
1154	1216	62	Sand and Shale - Top Tension 1154'
1216	1252	36	Sand and Shale - Top Sanction 1216'
TOTAL DEPTH		1252	Tops by Schlumberger Induction-Electrical Log.
PLUGGED BACK TOTAL DEPTH		1252	
FROM—	TO—	TOTAL FEET	FORMATION

ILLEGIBLE

(OVER)  
FORMATION RECORD—Continued

10-45004-4

NO. OF COPIES RECEIVED		5
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		2
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I.

Operator <b>Skelly Oil Company</b>		
Address <b>P.O. Box 730, Hobbs, New Mexico</b>		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
<b>Effective March 1, 1967</b>		

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "A"</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>Horseshoe Gallup</b>	Kind of Lease State, Federal or Fee <b>Fed</b>	Lease No. <b>14-20-603-3031</b>
Location				
Unit Letter <b>M</b>	<b>330</b>	Feet From The <b>South</b> Line and <b>330</b>	Feet From The <b>West</b>	
Line of Section <b>33</b>	Township <b>32N</b>	Range <b>17W</b>	, NMPM, <b>San Juan</b> County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>The Permian Corporation</b>	<b>P.O. Box 3119, Midland, Texas</b>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>NONE</b>						
If well produces oil or liquids, give location of tanks.	Unit <b>6</b>	Sec. <b>33</b>	Twp. <b>32N</b>	Rge. <b>17W</b>	Is gas actually connected? <b>No</b>	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.
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 County Shoe		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET					

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

(SIGNED) V. E. Fletcher

(Signature)

**District Superintendent**

(Title)

**March 9, 1967**

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY Original Signed by \_\_\_\_\_

TITLE SUPERVISOR DIST. #3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED		7
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		4
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator Getty Oil Company	
Address P. O. Box 3360, Casper, WY 82602	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner  
Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 1	Pool Name, Including Formation Horseshoe Gallup	Kind of Lease Federal State, Federal or Fee 14-20-603	Lease No. -5031
Location				
Unit Letter M ; 330 Feet From The South Line and 330 Feet From The West				
Line of Section 33 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland TX			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 33	Twp. 32N	Ege. 17W
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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RAB, 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)

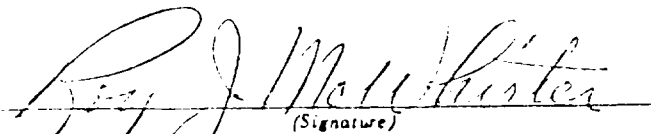
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL


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

VI. CERTIFICATE OF COMPLIANCE

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

  
(Signature)  
Area Superintendent  
(Title)  
2/4/77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED , 19  
BY ORIGINAL SIGNED BY N. L. MAXWELL, JR.  
TITLE

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED	6
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SANTA FE	
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LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	3
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I. Operator  
WTR Oil Company  
Address  
P.O. Drawer LL  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name and address of previous owner  
Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 1	Pool Name, Including Formation Horseshoe Gallup	Kind of Lease Federal	Lease No. 14-20-603-5013
Location Unit Letter M, 330 Feet From The South Line and 330 Feet From The West Line of Section 33 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refinery	Address (Give address to which approved copy of this form is to be sent) 5107 N. 7th St., Phoenix, Arizona 85014			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 33	Twp. 32N	Rge. 17W
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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Hooley  
(Signature)  
Co. operator  
(Title)  
Sept 11, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19  
Original Signed by A. R. Kendrick  
BY

TITLE SUPERVISOR DISTRICT # 8

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

NO. OF COPIES RECEIVED		
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FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

Operator  
BayStar Petroleum Corporation

Address  
P. O. Box 2975, Corpus Christi, Texas 78403

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change In Transporter of: Oil ☒ Dry Gas ☐

Recompletion ☐ Casinghead Gas ☐ Condensate ☐

Change In Ownership ☒

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 1	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee	Lease No. 14-20-603-5013
Location Unit Letter M ; 330 Feet From The South Line and 330 Feet From The West				
Line of Section 33 Township 32N Range 17W , NMPLM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1887, Bloomfield, NM 87413
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
G 33 32N 17W	

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 Restv.	Diff. Restv.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

  
(Signature)

Michael H. North, President  
(Title)

May 8, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 13 1985, 19

BY 

TITLE SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

OIL CONSERVATION DIVISION

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

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

I.

Operator A.P.A. Development Inc.	Well API No.
Address P.O. Box 215, Cortez, CO 81321	
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 checked="" 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 Navajo "M"	Well No. 1	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Navajo State, Federal or Fee 14	Lease No. -20-603-5013
Location Unit Letter M : 330 Feet From The South Line and 330 Feet From The West Line Section 33 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When?
	C   34   32N   17W

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.

*Patrick B. Woosley*

Signature  
Patrick B. Woosley Operator  
Printed Name Title

8/7/90 (303) 565-2458  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 28 1990

By *James J. Smith*

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

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

## OIL CONSERVATION DIVISION

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

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

I.

Operator A.P.A. Development, Inc.	Well API No. 300451114300S1
Address P.O. Box 215, Cortez, CO 81321	
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 checked="" 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 Navajo "M"	Well No. 1	Pool Name, including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-603-5013
Location				
Unit Letter M	: 330	Feet From The South	Line and 330	Feet From The West
Section 33	Township 32N	Range 17W	NMPM,	San Juan
County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Gary-Williams Energy Corporation	370 - 17th St., Ste 5300, Denver, CO 80202-5658		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
GEC West & Giant Ref.			
If well produces oil or liquids, give location of tanks.	Unit Soc. Twp. Rge.	Is gas actually connected?	When?
	G 33 32N 17W		

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.D.T.D.		
Elevations (IDF, 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/MMCF	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.

Signature Pattie Woosley	Operator
Printed Name 12/6/93	Title 303-565-2458
Date	Telephone No.

### OIL CONSERVATION DIVISION

DEC 14 1993

Date Approved	
By	
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.





APA Development  
NAVAJO M#2  
K-33-32N 17W.  
1980S 1980W  
45-11200



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 *AAA Development*  
*% NMOCO*

3. Address and Telephone No.

*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

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

*33-32N-17W 1980/5-2W*

5. Lease Designation and Serial No.  
*14-20-603-5013*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*2 Navajo M*

9. API Well No.

*30045 11200*

10. Field and Pool, or Exploratory Area

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 \_\_\_\_\_

- ☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOCO Contract Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date *8/17/00*

**API NUMBER** 30-045-11200  
**OPERATOR NAME** APA DEVELOPMENT CORP **WELL NUMBER** 2  
**PROPERTY NAME** NAVAJO M  
**SECTION 33** TOWNSHIP 32N **RANGE** 17W  
**FOOTAGE** 1980 FSL 1980 FWL UL "K"

	Sur Csg OD	NA HOLE	8 5/8	XX		XX
	SUR CSG TD		24	XX		XX
	SUR CSG WT		28	XX		XX
	TOP OF CMT		0	XX		XX
	ACTUAL			XX		XX
	CACULATED		9 SX	XX		XX
	PROD CSG OD	6 1/4	5	XX		XX
	PROD CSG TD TOP@793'		1164	XX		XX
	PROD CSG WT		11.5	XX		XX
	TOP OF CMT		749	XX		XX
FORMATION TOP	ACTUAL		EST			
GALLUP <del>1036</del> 860	CACULATED		50SX	XX		XX
	PERF TOP		1157	XX		XX
	PERF BOTTOM		1160	XX		XX
	PACKER		1150	XX		XX
	TYPE OF PLUG			XX		XX
	CIBP & CMT			XX		XX
	CMT			XX		XX

**CASING CUT AND PULLED @ 793**

**PROPOSED PLUGGING OPERATION:::THIS WELL WAS RE-ENTERED**

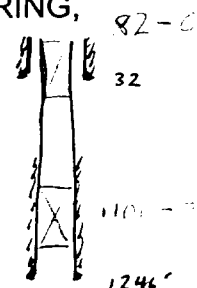
MIRU PU, BOPE, STING OUT OF PACKER POOH W/TUBING, RIH WORKSTRING,

**SPOT CMT PLUG 1106-700' WOC TAG, TOP AS REQUIRED,**

SURFACE PLUG 82' TO SURFACE ESTIMATE 26SX

CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS,

**Close pits according to guidelines: Clean and level location**



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency Savage  
Allottee Savage  
Lease No. 14-22-403-0013


SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	MAY 21 1959
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Well No. 2 is located 1900 ft. from S line and 1900 ft. from W line of sec. 23  
23 Section 23 30N 17W N.M.P.M.  
 (1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Chimney Rock (Gallup Nat.) San Juan New Mexico  
 (Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is \_\_\_\_\_ ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 2 to approximately 1900' to test the Gallup formation. Our casing program is as follows:

25' of 2-1/8" OD casing, cemented with 15 sacks regular cement, to be circulated.  
 1900' of 7" OD casing, to be cemented with 90 sacks cement.

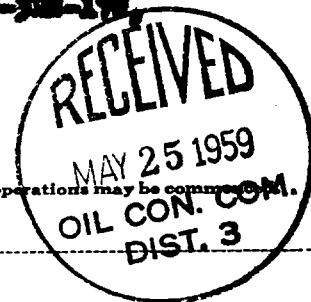
The designated drilling unit is the NE/4-SW/4 of Section 33-30N-17W, San Juan County, New Mexico.

ILLEGIBLE

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY  
 Box 426  
 Address Farlington, New Mexico

By (Signed) P. E. Cosper  
 Title District Superintendent



NEW MEXICO OIL CONSERVATION COMMISSION

Well Location and Acreage Dedication Plat

Section A.

Date May 15, 1959

Operator Shelly Oil Company Lease Navajo NAT  
Well No. 1 Unit Letter 2 Section 33 Township 32 North Range 17 West  
Located 1959 Feet From North Line, 1959 Feet From West Line  
County San Juan G. L. Elevation          Dedicated Acreage          Acres  
Name of Producing Formation Saltman Pool Shelly Wash (Shelly Nat.)

1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below?  
Yes          No
2. If the answer to question one is "no," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes          No         . If answer is "yes,"  
Type of Consolidation
3. If the answer to question two is "no," list all the owners and their respective interests below:

Owner

**ILLEGIBLE**

Land Description

Section B.

Re: Tract Survey for  
Oil and Gas Service Oil Co.  
Dated March 24, 1959. Navajo  
Tribal Lease 11-20-503-5013.

		Sec. 33	
		33	

**RECEIVED**

MAY 25 1959

OIL CON. COM.  
DIST. 3

This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SHelly Oil Company

(Operator)

(Signed) P. E. Cosper  
(Representative)

San Juan - Farmington, New Mexico

Address

This is to certify that the well location shown on the plat in Section A was plotted from field notes of a well survey 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 May 15, 1959

Ernest V. Echolaw  
Ernest V. Echolaw  
Registered Land Surveyor.

Certificate No. 1545

(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency Navajo  
Tribal Navajo  
Allottee Navajo  
Lease No. 11-22-402-2012


SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	<u>Surface</u>	<u>1</u>
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING		
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING		
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR		
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT		
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY		
NOTICE OF INTENTION TO ABANDON WELL			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

May 22, 1959

Navajo  
Well No. 2 is located 1000 ft. from S line and 1000 ft. from W line of sec. 22  
N. 1/4 Section 22 10N 17W N. 1/4, P. M.  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Chimney Rock (Gallup Nat.) San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5207 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

**REMARKS:** 12:30 P.M., May 22, 1959.

Ran & set 8-5/8" OD casing 24' from Ground Level or 22' from Kelly bucketing & cemented with 9 lbs. reg. cement, 25 Gall. Cemented by hand.

ILLEGIBLE



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY  
Address Box 426  
Farmington, New Mexico

By (Signed) P. E. Gosper  
Title District Superintendent

(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_  
Surveyor General \_\_\_\_\_  
Allottee \_\_\_\_\_  
Lease No. \_\_\_\_\_


SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	PRODUCTION
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	WELL
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONING	JUN 12 1959
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	Report of perforations	
	Report of sand - oil free	NEW M.

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Well No. 2 is located 2000 ft. from S line and 1000 ft. from W line of sec. 30  
24 (1/4 Sec. and Sec. No.) 24 (Twp.) 17N (Range) E.L.P.M. (Meridian)  
Colony Rock (Gallup Nat.) (Field) San Juan County (County or Subdivision) New Mexico (State or Territory)

The elevation of the derrick floor above sea level is 5000 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate casing joints, cementing points, and all other important proposed work)

Run and set 7" OD casing at 1144' and cemented with 50 sacks of regular cement.  
 Perforated 7" OD casing with 4 McMillan glass jets per foot as follows:

1144-1160' (41) 16 holes  
 1160-1175' (41) 24 holes  
 TOTAL (82') 40 holes

AND FRAC JOB No. 1. Casing perforations 1144-1160' & 1160-1175'.

Pumped down 7" casing 20,000' of 20/40 sand and 10,000 gallons crude oil.

Breakdown pressure 1800'. Maximum treating pressure 1700'. Minimum treating pressure 1500'.

Flushed with 200 barrels of crude oil. Injective rate 7.4 BPM. Standing pressure in 20 minutes 7500'. Pumped 200 gals. of Halliburton HSA acid ahead of free job.

ILLEGIBLE

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SATELLY OIL COMPANY

Address Box 426  
Farmington, New Mexico

By (Signed) P. E. Cosper

Title District Superintendent


(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_

**Navajo Tribal**

Allottee **Navajo**

Lease No. **11-22-473-200**

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY
NOTICE OF INTENTION TO ABANDON WELL	

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

August 4, 1959

Well No. **2** is located **2000** ft. from **S** line and **2000** ft. from **W** line of sec. **32**

**Sec. 32** (4 Sec. and Sec. No.) **Twp.** (Twp.) **17N** (Range) **N.M.P.M.** (Meridian)  
**Salinas Fork (Gallup Nat.)** (Field) **San Juan County** (County or Subdivision) **New Mexico** (State or Territory)

The elevation of the derrick floor above sea level is **2000** ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Pumped cement plug from 5" CD casing to 1095', cementing off casing perforations 1154-60' and 1167-73' with 15 sacks cement. Ran Dialing free point indicator and found 5" CD casing free at 793'. Cut 5" CD casing off at 793'. Set 25 sack cement plug 673-793'. Pulled 792' WBI of 5" CD casing. Put 5 sacks of cement in top of 8-5/8" CD casing at surface and set 4" pipe marker in top of surface casing and extended 4' above ground level.

Flagged and abandoned August 3, 1959.

ILLEGIBLE



I understand that this plan of work must receive approval in writing by the Geological Survey before operations have commenced.

Company **SKELLY OIL COMPANY**

Box 426

Address **Farmington, New Mexico**

By (Signed) **P. E. Cosper**

Title **District Superintendent**

BEFORE THE OIL CONSERVATION COMMISSION  
OF THE STATE OF NEW MEXICO

A.P.A. DEVELOPMENT  
NAVAJO M #002  
K-33-32N-17W

IN THE MATTER OF THE HEARING  
CALLED BY THE OIL CONSERVATION  
COMMISSION OF NEW MEXICO FOR  
THE PURPOSE OF CONSIDERING:

CASE No. 2423  
Order No. R-2124

APPLICATION OF SKELLY OIL COMPANY  
FOR A PRESSURE MAINTENANCE PROJECT  
IN THE HORSESHOE-GALLUP OIL POOL,  
SAN JUAN COUNTY, NEW MEXICO.

ORDER OF THE COMMISSION

BY THE COMMISSION:

This cause came on for hearing at 9 o'clock a.m. on November 8, 1961, at Santa Fe, New Mexico, before Elvis A. Utz, Examiner duly appointed by the Oil Conservation Commission of New Mexico, hereinafter referred to as the "Commission," in accordance with Rule 1214 of the Commission Rules and Regulations.

NOW, on this 17th day of November, 1961, the Commission, a quorum being present, having considered the application, the evidence adduced, and the recommendations of the Examiner, Elvis A. Utz, and being fully advised in the premises,

FINDS:

(1) That due public notice having been given as required by law, the Commission has jurisdiction of this cause and the subject matter thereof.

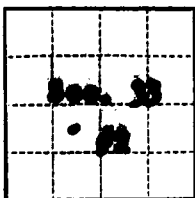
(2) That the applicant, Skelly Oil Company, proposes to institute a pressure maintenance project in the Horseshoe-Gallup Oil Pool, San Juan County, New Mexico, by the injection of water into the Gallup formation through the Navajo "M" Well No. 2, located 1980 feet from the South line and 1980 feet from the West line of Section 33, Township 32 North, Range 17 West, NMPM, San Juan County, New Mexico.

(3) That the applicant seeks authorization to institute the above-described pressure maintenance project in order to offset the pressure maintenance project of Humble Oil & Refining Company which lies to the South of the proposed project, and that the applicant does not intend to expand the proposed project.

(4) That the Navajo "M" Well No. 1 located in the SW/4 SW/4 of said Section 33 is the only producing well on the above-described Navajo "M" Lease.

(5) That in regard to provisions governing allowables for the proposed project, the applicant seeks an order providing that





(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_

Navajo Tribal

Allottee Navajo Tribe

Lease No. 14-20-403-9029

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	<div style="border: 2px solid black; padding: 5px; text-align: center;"> RECEIVED FEB 1 1962 U. S. GEOLOGICAL SURVEY FARMINGTON, NEW MEXICO </div>
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL		
<u>Convert Well To Water Injection</u> <b>XX</b>		

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Hobbs, New Mexico - January 30, 1962

Navajo Tribe

Well No. 23 is located 1900 ft. from NE line and 1900 ft. from W line of sec. 33

NE 1/4 SW 1/4 Sec. 33  
(1/4 Sec. and Sec. No.)

12-N  
(Twp.)

17-W  
(Range)

N.M.P.M.  
(Meridian)

Horseshoe Gallup  
(Field)

San Juan  
(County or Subdivision)

New Mexico  
(State or Territory)

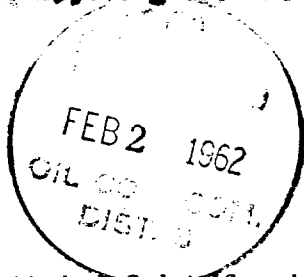
The elevation of the derrick floor above sea level is 5209 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudlogging jobs, cementing points, and all other important proposed work)

This well was plugged and abandoned on August 3, 1959. We now propose to drill out cement and clean out well to 1200'. We will then perforate 5" OD casing from 1156' to 1160' and run 2-1/2" tubing to 1156' with Baker Model "B" Production on bottom. Acidize through new 5" OD casing perfor. 1156-1160' with approx. 1000 gals. 15% Reg. Acid and fracture with approx. 15,000 gals. water and 15,000# sand.

ILLEGIBLE



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

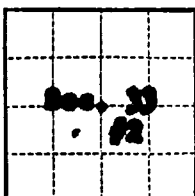
Company Shelly Oil Company

Address P.O. Box 38

Hobbs, New Mexico

By J E Aub

Title Dist. Supt.



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_  
Navajo Tribal \_\_\_\_\_  
Allottee Navajo Tribe \_\_\_\_\_  
Lease No. 14-32-497-2013

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL.....	SUBSEQUENT REPORT OF WATER SHUT-OFF.....
NOTICE OF INTENTION TO CHANGE PLANS.....	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.....
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.....	SUBSEQUENT REPORT OF ALTERING CASING.....
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL.....	SUBSEQUENT REPORT OF REDRILLING OR REPAIR.....
NOTICE OF INTENTION TO SHOOT OR ACIDIZE.....	SUBSEQUENT REPORT OF ABANDONMENT.....
NOTICE OF INTENTION TO PULL OR ALTER CASING.....	SUPPLEMENTARY WELL HISTORY.....
NOTICE OF INTENTION TO ABANDON WELL.....	Convert Well to Water Injection <b>XX</b>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Navajo, New Mexico - February 27, 1962

Navajo "X"  
Well No. 2 is located 1900 ft. from 24 line and 1900 ft. from W line of sec. 33

NE/4 SW/4 Sec. 33  
(1/4 Sec. and Sec. No.)

12-N  
(Twp.)

17-W  
(Range)

N.M.P.M.  
(Meridian)

Marathon County  
(Field)

San Juan  
(County or Subdivision)

New Mexico  
(State or Territory)

RECEIVED  
MAR 2 1962

The elevation of the derrick floor above sea level is 5309 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Drilled cement & cleaned out well to 1164'. P.S.T.D. 1164'. Perforated 5" OD casing from 1157' to 1160'; total 3' and a total of 12 holes. Run 2-7/8" OD tubing with Baker Model "W" Latch-In Production Packer set at 1155'. Acidized through 5" OD casing pores, 1157-1160' with 1000 gals. Dowell 1% Break-Down Acid and fractured through 5" OD casing pores, 1157-1160' with 27,174 gals. fresh water, 15,000# 20/40 sand & 210# J-2 Additive. Shut well - Waiting on Water Flood Equipment.

Date Work Performed: January 26 through February 7, 1962.

ILLEGIBLE

RECEIVED  
MAR 5 1962  
OIL CON. COM.  
DIST. 3

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address P. O. Box 96

Navajo, New Mexico

(ORIGINAL SIGNED) H. E. Aab

By \_\_\_\_\_

Title Dist. Supt.

NO. OF COPIES RECEIVED	3
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	1

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease Fed. <input checked="" type="checkbox"/> Indian <input type="checkbox"/>
5. State Oil & Gas Lease No. Fed. Cont #14-20-603-5013
7. Unit Agreement Name -----
8. Farm or Lease Name Navajo "M"
9. Well No. 2
10. Field and Pool, or Wildcat Horseshoe Gallup
12. County San Juan

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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <b>Water Injection Well</b>
2. Name of Operator Skelly Oil Company
3. Address of Operator 330 So. Center-Rm. 208, Casper, WY 82601
4. Location of Well UNIT LETTER <b>K</b> , <b>1980</b> FEET FROM THE <b>S</b> LINE AND <b>1980</b> FEET FROM THE <b>W</b> LINE, SECTION <b>33</b> TOWNSHIP <b>32N</b> RANGE <b>17W</b> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 5389 DF

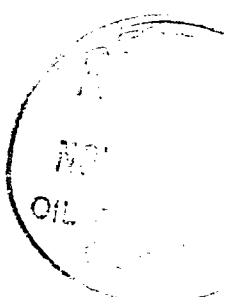
16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/> 4/1/71	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Plans are to put the Former injection well back on production in 1975.'

Permission is requested for continuation of TA status for at least one year.



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

SIGNED <u>J. Newkirk</u>	TITLE <u>Area Superintendent</u>	DATE <u>10/30/74</u>
Original Signed by <u>Ernest C. Arnold</u>	SUPERVISOR DIST. # <u>3</u>	DATE <u>NOV 5 1974</u>
APPROVED BY _____	TITLE _____	DATE _____
CONDITIONS OF APPROVAL, IF ANY:		

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

Cont. 14-20-603-5013

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection well	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
2. NAME OF OPERATOR Skelly Oil Company	7. UNIT AGREEMENT NAME
3. ADDRESS OF OPERATOR Box 3360, Casper, WY 82602	8. FARM OR LEASE NAME Navajo "M"
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 1980' FWL (NE/4 SW/4)	9. WELL NO. 2
14. PERMIT NO.	10. FIELD AND POOL, OR WILDCAT Horseshoe Gallup
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5389' DF	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 33-T32N-R17W
	12. COUNTY OR PARISH San Juan
	13. STATE NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON\* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT\* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

(Other) Temporarily Abandon ☒

(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 pertinent to this work.)\*

A study is being made for possible recompletions to other zones in this lease and this injection well would be returned to a producing well.

Permission is requested for continuation of the TA status for one more year.

TEMPORARY ABANDONMENT  
EXPIRES JUN 1 1977

JUN 15 1976

18. I hereby certify that the foregoing is true and correct  
SIGNED Roy J. McWhorter TITLE Area Superintendent DATE 6/11/76  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

TONEY ANAYA  
GOVERNOR

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-8178

January 10, 1986

BayStar Petroleum Corp.  
Suite 900  
First City Tower II  
PO Box 2975  
Corpus Christi, TX 78403

Re: Navajo M #2      K-33-32N-17W

Gentlemen:

Upon review of the NMOCD files of the referenced injection well, I find that the temporary abandonment status expired on June 1, 1977. NMOCD Rule 202.B. states that upon expiration of the permit for temporary abandonment and any extension thereto, the well shall be put to beneficial use or shall be permanently plugged and abandoned, unless it can be shown to the Division after notice and hearing that good cause exists why the well should not be plugged and abandoned, and a further extension to the temporary abandonment permit should be issued. In order to comply with NMOCD Rule 202.B. you are hereby directed to either return the referenced well to active status or plug and abandon it within six months.

Yours truly,

A handwritten signature in cursive script, appearing to read "Carolyn J. Taplin".

Carolyn J. Taplin  
Field Representative

xc: Prentiss Childs  
✓ Well File  
Operator File  
UIC File

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <b>A.P.A. Development Corporation</b>	
Address <b>P.O. Box 215, Cortez, Colorado 81321</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "M"</b>	Well No. <b>2</b>	Pool Name, including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Navajo</b>	Lease No. <b>14-20-603-5013</b>
Location Unit Letter <b>K</b> : <b>1980</b> Feet From The <b>South</b> Line and <b>1989</b> Feet From The <b>West</b> Line of Section <b>33</b> Township <b>32N</b> Range <b>17W</b> , NMPM, <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <b>Injection Well</b>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Patrick B. Woolley*  
(Signature)  
**Operator**  
(Title)  
**10-12-88**  
(Date)

OIL CONSERVATION DIVISION

APPROVED **10-17-1988**  
BY *Eric J. Shaw*  
TITLE **SUPERVISION DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-5013

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo "M"

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Many Rocks GAH

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

Sec 33 T32N R17W

12. COUNTY OR PARISH 13. STATE

San Juan NM

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.)

OIL WELL ☐ GAS WELL ☐ OTHER WIW

2. NAME OF OPERATOR

APA Development Inc.

3. ADDRESS OF OPERATOR

Box 215 Cortez CO. 81321

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

At surface

1980' FSL 1980' FWL  
Sec 33 T32N R17W

14. PERMIT NO.

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

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETION ☐

SHOOT OR ACIDIZE ☐

ABANDON ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) THA

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT ☐

(Other) ☐

(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 pertinent to this work.

Plan to set Drillable bridge plug on top of  
perfs, test casing.

RECEIVED

MAR 27 1992

OIL CON. DIV.  
DIST. 3

019 FARRINGTON, N.M.

92 MAR 17 PM 1:58

RECEIVED  
BLM

THIS APPROVAL EXPIRES APR 01 1993

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

SIGNED

Pat Wooley

TITLE

DATE

3/13/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

MAR 26 1992

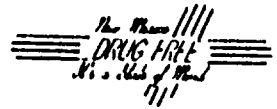
AREA MANAGER

\*See Instructions on Reverse Side

NMOCD



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE



BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

December 4, 1992

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells

Navajo AA #4, E-17-32N-17W  
Navajo AA #13, B-20-32N-17W  
Navajo #11, E-27-32N-17W  
Navajo #6, K-27-32N-17W  
Navajo #3, O-27-32N-17W  
Navajo #12, I-28-32N-17W  
Navajo P #6, J-35-32N-17W

~~Navajo M #2, K-33-32N-17W~~  
Navajo M #7, B-34-32N-17W  
Navajo #10, J-27-32N-17W  
Navajo P #11, D-35-32N-17W  
Navajo P #9, F-35-32N-17W  
Navajo P #7, J-35-32N-17W

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by April 1, 1992 and work completed by December 31, 1993.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File  
David Catanach-UIC Director  
~~Well File~~  
George Robin-EPA





STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DIVISION  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

April 13, 1993

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells

Navajo AA #4, E-17-32N-17W	Navajo AA #13, B-20-32N-17W
Navajo #11, E-27-32N-17W	Navajo #10, J-27-32N-17W
Navajo #6, K-27-32N-17W	Navajo #3, O-27-32N-17W
Navajo #12, I-28-32N-17W	Navajo M #2, K-33-32N-17W
Navajo M #7, B-34-32N-17W	Navajo P #11, D-35-32N-17W
Navajo P #9, F-35-32N-17W	Navajo P #7, J-35-32N-17W
Navajo P #6, P-35-32N-17W	

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated. You are required to file for a permit to inject under Rule 701 prior to any injection.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by June 1, 1993 and work completed by June 1, 1994.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File  
David Catanach-UIC Director  
Well File  
David Holguin-EPA

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

5. Lease Designation and Serial No.

14-20-603-5013

6. If Indian, Allottee or Tribe Name

NAVAJO

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other WIW

2. Name of Operator

A.P.A. Development, Inc.

3. Address and Telephone No.

P.O. Box 215, Cortez, CO 81321 303-565-2458

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

1980' FSL & 1980' FWL, Sec. 33, T32N R17W

8. Well Name and No.

NAVAJO M #2

9. API Well No.

30045112000051

10. Field and Pool, or Exploratory Area

Many Rocks

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 \_\_\_\_\_
- ☐ 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.)\*

Plan to continue T.A. status.

RECEIVED

APR 9 1993

OIL CON. DIV  
DIST. 3

RECEIVED  
BLM  
APR 30 11:11:37  
OIL CON. DIV, NM

APR 01 1994

THIS APPROVAL EXPIRES

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

Signed Pat Woolley

Title \_\_\_\_\_

Date 3/29/93

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any: \_\_\_\_\_

Title \_\_\_\_\_

APPROVED  
AS AMENDED

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

NMCO

DISTRICT MANAGER

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

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

SUNDRY NOTICES AND REPORTS ON WELL

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>W I W</u>	5. Lease Designation and Serial No. <u>14-20-603-5013</u>
2. Name of Operator <u>A.P.A. Development, Inc.</u>	6. If Indian, Allottee or Tribe Name <u>NAVAJO</u>
3. Address and Telephone No. <u>P.O. Box 215, Cortez CO 81321 303-565-2458</u>	7. If Unit or CA, Agreement Designation <u>30045112000051</u>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <u>1980' FSL + 1980' FWL</u> <u>Sec. 33 T32N R17W</u>	8. Well Name and No. <u>Navajo M # 2</u>
	9. API Well No.
	10. Field and Pool, or Exploratory Area <u>Many Rocks Halling</u>
	11. County or Parish, State <u>SAN JUAN, NM</u>

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 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 checked="" type="checkbox"/> Other <u>Long term shut in</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.)\*

Plan to change original plan of setting bridge plug and MIT casing, changing status to long term shut-in.

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

RECEIVED

MAY 18 1993

OIL CON. DIV  
DIST. 3

THIS APPROVAL EXPIRES APR 01 1994

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

Signed Pat Wootley Title \_\_\_\_\_ Date 5-3-93

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_  
Conditions of approval, if any:

APPROVED

MAY 13 1993

DISTRICT MANAGER

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  
FARMINGTON RESOURCE AREA  
1235 LA PLATA HIGHWAY  
FARMINGTON, NEW MEXICO 87401

CONDITIONS OF APPROVAL:

This Shut-In approval is contingent upon conducting a casing integrity test by SEP 15 1993. Mark Kelly with the Farmington Office is to be notified at least 48 hours prior to conducting the casing integrity test (505-599-8907). If the casing test fails, you will be required to submit your plans to repair the casing or plug and abandon the well.

Office Hours: 7:45 a.m. to 4:30 p.m.

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

RECEIVED  
BLM

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

5. Lease Designation and Serial No.

4-20-603-5013

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

Navajo "M"

8. Well Name and No.

1-2

9. API Well No.

3004512000051

10. Field and Pool, or Exploratory Area

Many Rocks 6A1

11. County of Parish, State

San Juan N.M.

SUBMIT IN TRIPLICATE

070/FARMINGTON, NM

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other injection Well

2. Name of Operator

APA Development, Inc.

3. Address and Telephone No.

P.O. Box 215 Cortez, CO. 81321 (303)565-2458

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

1980 FSL 1980 FWL Sec 33 T32N R17W

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

☐ 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.)

Plan to Plug Well as follows:

1. latch out of Model D packer and equalize cement Plug from 1246' to 1106'
2. Pick up to 800' place cement plug inside and outside 5 1/2" casing stub
3. Pick up to 750' circulate hole to 50' with inhibited water
4. cement 50' to surface
5. weld on dry hole marker on 8 5/8" casing, clean and remediate location

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

Signed Pat W. Waley

Title SEE ATTACHED FOR

Date 10/14/99

(This space for Federal or State office use)

CONDITIONS OF APPROVAL

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

APPROVED

OCT 25 1999

WETZELMANAGER

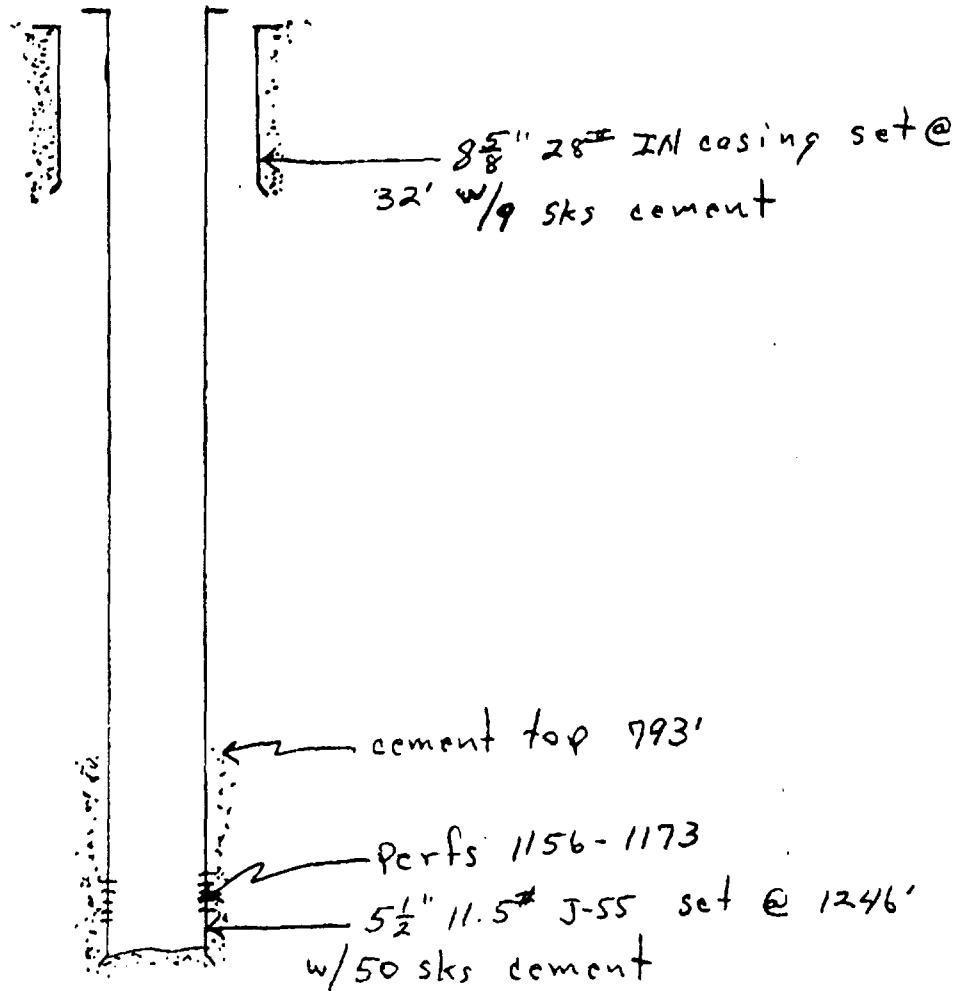
\*See Instruction on Reverse Side

NAOCD

Vevajo M-2

Lease # 14-20-603-5013

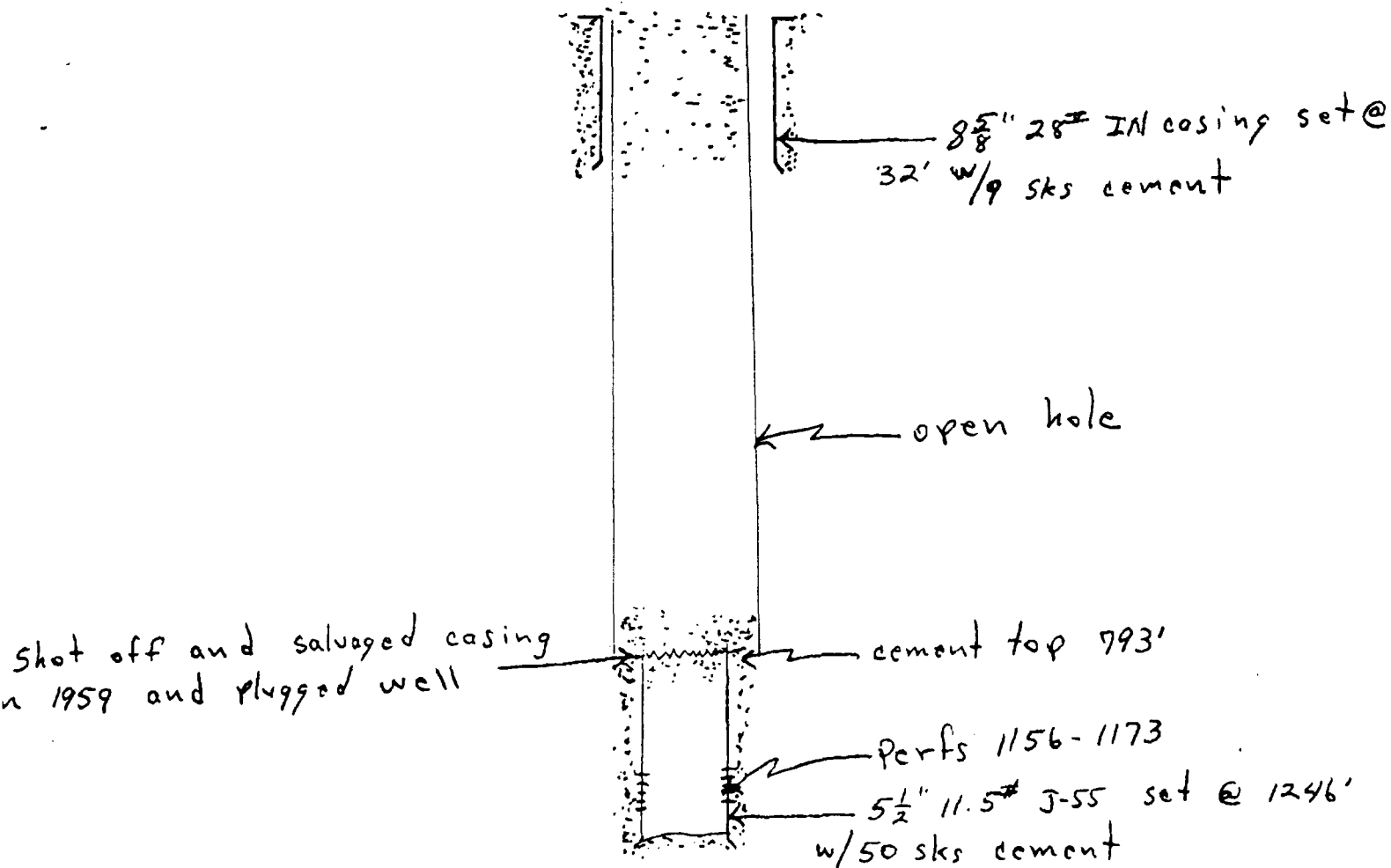
As existed in 1959



Wells M-2

Lease # 14-20-603-5013

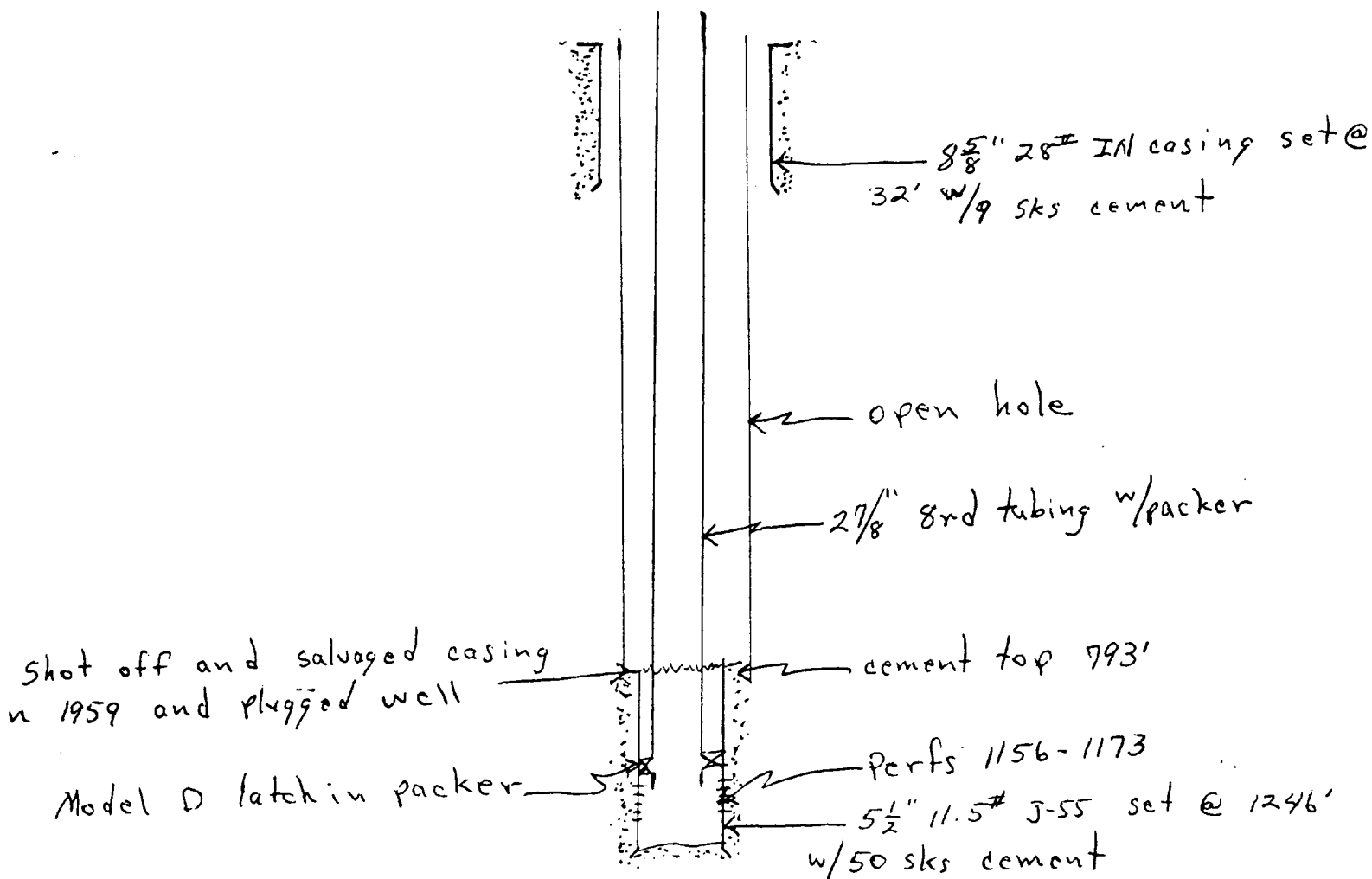
As Plugged in 1959



~~rev 2~~ M-2

Lease # 14-20-603-5013

As exists today

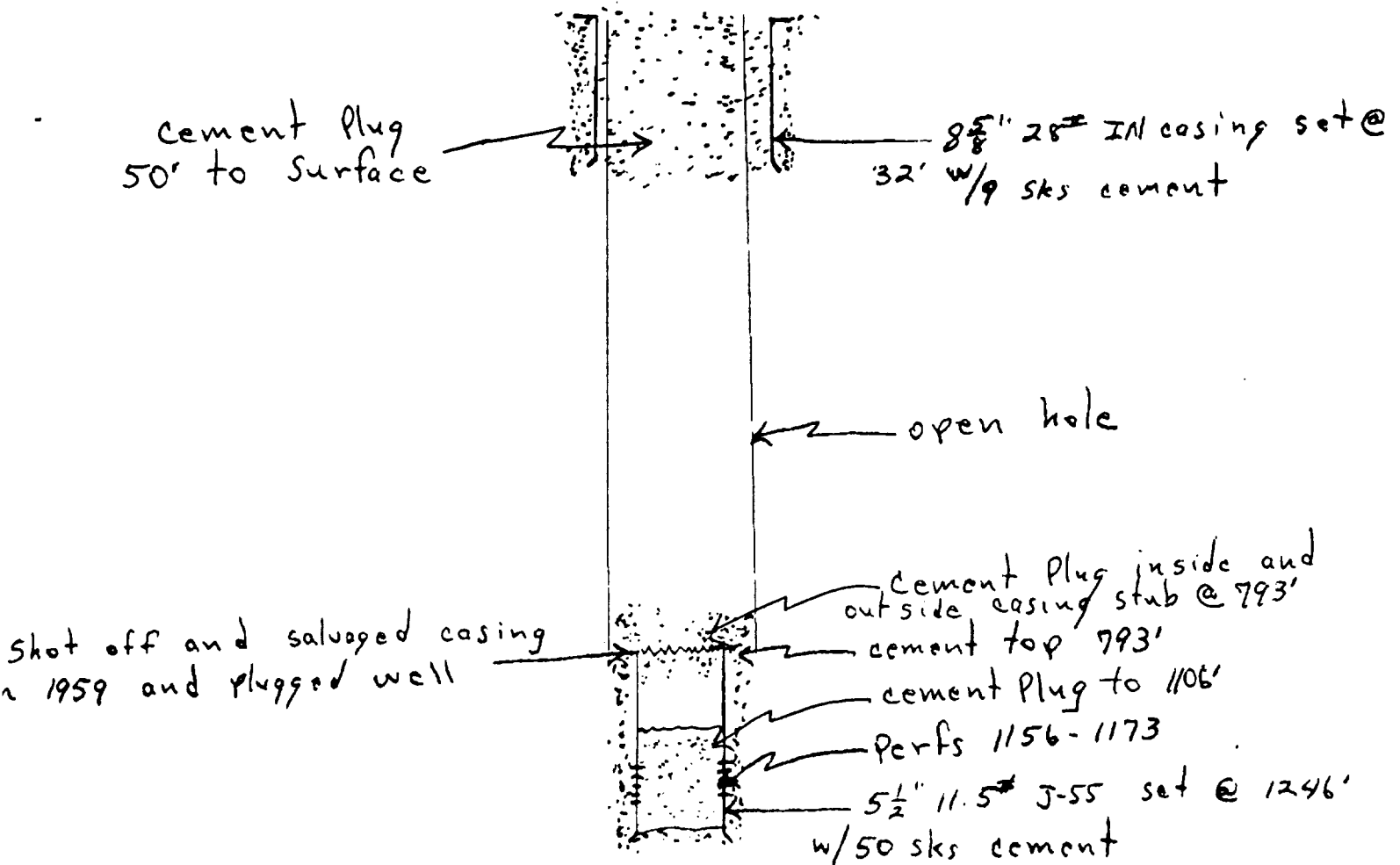




Vevaja M-2

Lease # 14-20-603-5013

## Purposed Plugging





# United States Department of the Interior

BUREAU OF LAND MANAGEMENT

Farmington District Office  
1235 La Plata Highway  
Farmington, New Mexico 87401

RECEIVED  
BLM  
94 OCT 18 AM 11:16  
070 FARMINGTON, NM

IN REPLY REFER TO:

14-20-603-5013 (WC)  
3162.3-2 (070)

September 30, 1994

CERTIFIED - RETURN RECEIPT REQUESTED  
Z 106 603 524

Mr. Pat Woosley  
A.P.A. Development, Inc.  
P. O. Box 215  
Cortez, CO 81321

Dear Mr. Woosley:

Reference is made to well number 2 Navajo M, 1980' FSL & 1980' FWL, Sec. 33, T. 32 N., R. 17 W., Lease No. 14-20-603-5013, San Juan County, New Mexico. The subject well was approved for long-term shut in until April 1, 1994 and a casing integrity test was to be performed. Mr. James Woosley had called on July 27, 1994 and informed us that he was going to pressure test the well that day. It is required that a Sundry Notice be submitted on the results of the test and your plans for the well as was stated in our letter of June 23, 1994.

You have 30 days to comply with this order. The 30 days commence upon receipt of this letter or seven days from the date it is mailed, whichever is less. Failure to comply within the 30 days will result in strict enforcement of 43 CFR 3163.1.

Under provisions of 43 CFR 3165.3, you may request an Administrative Review of the orders described above. Such request, including all supporting documents, must be filed in writing within 20-business days of receipt of this notice and must be filed with the State Director, Bureau of Land Management, P.O. Box 27115, Santa Fe, New Mexico 87502-7115. Such requests shall not result in a suspension of the orders unless the reviewing official so determines. Procedures governing appeals from instructions, orders or decisions are contained in 43 CFR 3165.4 and 43 CFR 4.400 *et seq.*

**UNITED STATES DEPARTMENT OF THE INTERIOR**

**BUREAU OF LAND MANAGEMENT  
FARMINGTON DISTRICT OFFICE**

1235 La Plata Highway  
Farmington, New Mexico 87401

Attachment to Notice of  
Intention to Abandon

Re: Permanent Abandonment  
Well: **2 Navajo M**

**CONDITIONS OF APPROVAL**

1. Plugging operations authorized are subject to the attached "General Requirements for Permanent Abandonment of Wells on Federal and Indian Leases."
2. **Mike Flaniken** with the Farmington Office is to be notified at least 24 hours before the plugging operations commence (505) 599-8907.
3. The following modifications to your plugging program are to be made (when applicable):
  1. **Tag top of cement plug @ 1106'.**
  2. Spot a cement plug from 905' to 743' plus 50 linear feet excess. (top of Gallup @ 855', top of cut off casing @ 793')
  3. Extend surface plug from 82' to the surface. (surface casing @ 32')

**Note:** The above modifications are minimum standards. It is acceptable to pump additional cement and combine plugs.

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

5. Lease Designation and Serial No.

1420603 5013

6. If Indian, Allottee or Tribe Name

NAVAJO TAGAL

7. If Unit or CA, Agreement Designation

8. Well Name and No.

NO 2 NAVAJO M

9. API Well No.

3004511200

10. Field and Pool, or Exploratory Area

MANY ROCKY

11. County or Parish, State

SAN JUAN NM

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

APA Development INC

3. Address and Telephone No.

PO Box 1083 Shiprock 87420

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

NO 2 Navajo M 1980 FSL + 1980 FWL  
Sec 33 Ne 1/4 1420-603-5013 T32N, R17W  
1420-603-5013-32N-17W

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  
☐ 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.)

#2 NAVAJO M WILL Aid M #1 as an  
Injection well 12 mo

RECEIVED  
JUN 16 1997  
OIL CON. DIV.  
DIST. 3

070 (FACILITY) NM  
9/ JUN -2 PM 3:01

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

Signed \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

(This space for Federal or State office use)

Approved by AS/ Donna W. Spencer Title \_\_\_\_\_ Date JUN 12 1997  
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 Instruction on Reverse Side



## SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
<b>See Reverse</b>						

## TOOLS USED

Rotary tools were used from 0 feet to 1758 feet, and from  feet to  feet  
 Cable tools were used from  feet to  feet, and from  feet to  feet

## HISTORY OF DATES

It is of the greatest importance to have a complete history of the well. Put to producing 19  
 with the reasons for the work. If there were any changes in the well, give dates. This production for the first 24 hours was  barrels of fluid of which  % was oil;  %  
 of that. The production for the first 24 hours was  barrels of fluid of which  % was oil;  %  
 emulsion;  % water; and  % sediment. Gravity, °Be.

If gas well, cu. ft. per 24 hours  Gallons gasoline per 1,000 cu. ft. of gas    
 Performed  Rock pressure, lbs. per sq. in.  

## EMPLOYEES

1156-1160 Driller 16 holes  Driller  
 Well Completions, 1171-1172 Driller 24 holes  Driller  
 Total  (10)  holes

## FORMATION RECORD

FORMATION	FORMATION	FORMATION
Frased drilling formation down 5" casing to 1096'.	1036	1036
gallons of crude oil. BHP 2000.	1154	115
Injection rate 7.6 BPM. Pumped 200 gallons.	1196	92
frase job.	1258 TD	62
0		
1036		
1134		
1196		

Top Lower Gallup 1036'. Sand and Shale  
 Top Tecite 1154'. Sand and Shale  
 Top Sanastee 1196'. Sand and Shale

Tops by Schlumberger Induction-Electrical Log.

This well was tested from May 30, 1959 to August 2, 1959. Total load oil was never recovered.

August 3, 1959 - Pumped cement plug down 5" OD casing to 1095', squeezed of casing perforations 1156-60' and 1167-73' with 15 sacks cement. Ran Dialog free point indicator and found 5" OD casing free at 793'. Cut 5" OD casing off at 793'. Set 25 sack cement plug 693-793'. Pulled 791' WTM of 5" OD casing. Put 5 sacks of cement in top of 8-5/8" casing at surface and set 4" pipe marker in top of surface casing and extended 4' above ground level.

ILLEGIBLE

LEON-	LO-	LOLVY ARL	LOEMVION
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(OVER)  
 FORMATION RECORD-Continued

16-48004-4

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	1
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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

Lease Name Navajo "M"	Well No. 2	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-603-5013
Location Unit Letter <u>K</u> ; <u>1980</u> Feet From The <u>South</u> Line and <u>1989</u> Feet From The <u>West</u> Line of Section <u>33</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Injection well		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 type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.
			Pge.
Is gas actually connected?		When	

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

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Peasley  
(Signature)  
co-operator  
(Title)  
9-11-1979  
(Date)

OIL CONSERVATION COMMISSION  
SEP 12 1979

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by A. R. Kendrick  
SUPERVISOR DISTRICT # 3  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

NO. OF COPIES RECEIVED		
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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I.

Operator BayStar Petroleum Corporation	
Address P. O. Box 2975, Corpus Christi, Texas 78403	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) Injection Well (Shut-in)	

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 2	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. 14-20-603-5013
Location Unit Letter K ; 1980 Feet From The South Line and 1980 Feet From The West				
Line of Section 33 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" 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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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:

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
May 8, 1985  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED MAY 13 1985  
BY  
TITLE SUPERVISOR DISTRICT # 2

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.



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

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo Tribe

7. If Unit or CA, Agreement Designation

8. Well Name and No.

8 Navajo PM

9. API Well No.

30045 11154

10. Field and Pool, or Exploratory Area

11. County or Parish, State

San Juan, NM

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator APA Development Corp.

% NMOCO

3. Address and Telephone No.

1000 Rio Brazos Rd. Aztec NM 87410 334-6178

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

35-32N-17W 660/5a 660/W 1920 1/2 Sec. 34

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 \_\_\_\_\_  
☐ 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.)\*

See attached plugging procedure.

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

Signed NMOCO Contractor Plugging Title 8

Date 8/11/00

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date 8/17/00

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  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-5013

## 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME -
2. NAME OF OPERATOR <b>Skelly Oil Company</b>	8. FARM OR LEASE NAME <b>Navajo "H"</b>
3. ADDRESS OF OPERATOR <b>Box 730 - Hobbs, New Mexico</b>	9. WELL NO. <b>8</b>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  <b>1980' FHL &amp; 775' FHL Sec. 34-32N-17W</b>	10. FIELD AND POOL, OR WILDCAT <b>Many Rocks Gallup</b>
14. PERMIT NO.	11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA <b>Sec. 34-32N-17W</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>5899' GR.</b>	12. COUNTY OR PARISH <b>San Juan</b>
	13. STATE <b>New Mexico</b>

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐**Convert well to water injection**

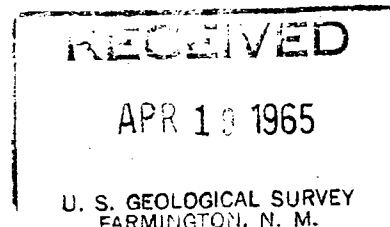
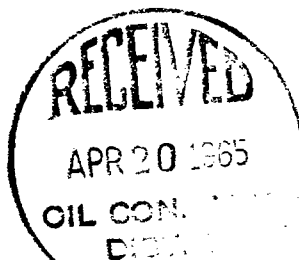
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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 pertinent to this work.)\*

Moved in and rigged up pulling unit. Pulled rods and tubing. Installed Water Injection Equipment and started injecting water into the Gallup Formation through 5-1/2" OD casing perfs. 1732-1738' on ~~April 12, 1965~~.

This well is a Water Injection Well for the Many Rocks Gallup Pressure Maintenance Project No. 3 Area "B" in the Many Rocks Gallup Oil Pool.

Date work performed - April 7, 1965.



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

SIGNED (ORIGINAL) **H. E. Aeb**TITLE **Dist. Superintendent**DATE **April 15, 1965**

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. <b>14-20-603-5213</b>	
2. NAME OF OPERATOR <b>Shelly Oil Company</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Mountain Tribal</b>	
3. ADDRESS OF OPERATOR <b>Box 730 - Hobbs, New Mexico</b>		7. UNIT AGREEMENT NAME <b>---</b>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>1980' FHL &amp; 775' FHL Sec. 34-32N-17W</b>		8. FARM OR LEASE NAME <b>Navajo "H"</b>	
14. PERMIT NO.		9. WELL NO. <b>8</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>5899' Gr.</b>		10. FIELD AND POOL, OR WILDCAT <b>Many Rocks Gallup</b>	
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA <b>Sec. 34-32N-17W</b>	
		12. COUNTY OR PARISH <b>San Juan</b>	
		13. STATE <b>New Mexico</b>	

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <b>Convert well to Water Injection</b>	

## SUBSEQUENT REPORT OF:

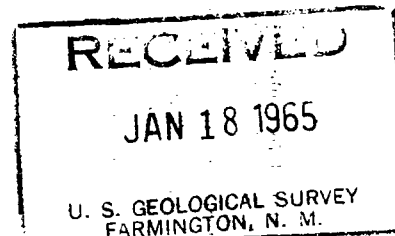
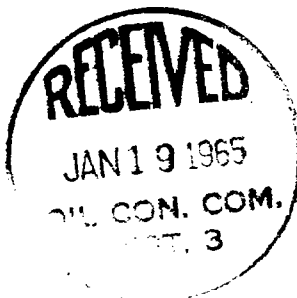
WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) _____	

(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 pertinent to this work.)\*

We plan to pull the rods and tubing out of this well. We will then install water injection equipment and inject water through 5-1/2" OD casing perfs. 1732-1738' into the Gallup Formation.

This well will be a Water Injection Well for the Many Rocks Gallup Pressure Maintenance Project No. 3 in the Many Rocks Gallup Oil Pool, San Juan County, New Mexico.



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

SIGNED **(ORIGINAL SIGNED) H. E. Aab**TITLE **Dist. Superintendent**DATE **JAN 15 1965**

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

Form approved.  
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.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Injection Well "Water"

2. NAME OF OPERATOR Bay Star Petroleum Corporation

3. ADDRESS OF OPERATOR P.O. Box 2975 Corpus Christi, Texas 78403

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface 1980 fml + 775 fcl from the A1e/4 of section 34

14. PERMIT NO. 15. ELEVATIONS (Show whether OF, AT, OR, etc.) 5899' GR

5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-5013

6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME Navajo M

9. WELL NO. # 8

10. FIELD AND POOL, OR WILDCAT Mann Rock Ks

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 34-T32N-R17W

12. COUNTY OR PARISH San Juan

13. STATE N.M.

RECEIVED

AUG 15 1985

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETION ☐

ABANDON\* ☐

CHANGE PLANE ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☒

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(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 pertinent to this work.)\*

Work performed on 7/24/85 Backside filled with 10 barrels of water and packer held. 165 gallons of water was mixed with Unidem 410 chemical. Chemical was pumped in and displaced with 388 gallons of H<sub>2</sub>O at 900 psi. The well was left off overnight and then injection started again on 7/25/85.

RECEIVED

AUG 19 1985

OIL CON. DIST. C

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

SIGNED Donald L. Whelan

TITLE Geologist

DATE 8/14/85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

AUG 16 1985

FARMINGTON RESOURCE AREA

BY smm

\*See Instructions on Reverse Side

IMOC

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	GAS
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator <b>A.P.A. Development Corporation</b>	
Address <b>P.O. Box 215, Cortez, Colorado 81321</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner: **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "M"</b>	Well No. <b>8</b>	Pool Name, including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Navajo</b>	Lease No. <b>14-20-603-5013</b>
Location Unit Letter <b>H</b> : <b>775</b> Feet From The <b>East</b> Line and <b>1980</b> Feet From The <b>North</b> Line of Section <b>33 34</b> Township <b>32N</b> Range <b>17W</b> , NMPM, <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <b>Injection well</b>	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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Patricia B. Woolley*  
(Signature)  
**Operator**  
(Title)  
**10-12-88**  
(Date)

OIL CONSERVATION DIVISION  
OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY *[Signature]*  
TITLE **SUPERVISION DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



STATE OF NEW MEXICO  
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE



GARY E. JOHNSON  
GOVERNOR

JENNIFER A. SALISBURY  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178 FAX (505) 334-6179

October 10, 1995

APA Dev Corp  
PO Box 215  
Cortez CO 81321

RE: Navajo M #8, H-34-32N-17W, 30-045-11193

Gentlemen:

According to Rule #705C paragraph one of the New Mexico Rules & Regulations Manual, whenever there is a six-month period of non injection into any injection project, storage project, salt water disposal well or special purpose injection well, such project or well will be considered abandoned and the authority for injection will automatically terminate ipso facto.

Our records do not show any injection into the Navajo M #8 in 1995. Therefore, authority to inject has been canceled as of October 6, 1995.

Sincerely,

Johnny Robinson  
Deputy O&G Inspector

JR/sh

cc: Well file  
UIC file  
Ben Stone, UIC Coordinator Santa Fe  
Frank Chavez, Supervisor District III  
Jim Walker, Navajo EPA

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

5. Lease Designation and Serial No.  
14206035013

6. If Indian, Allottee or Tribe Name  
NAVAJO Tribal

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

APR Development Inc

3. Address and Telephone No.

P.O. Box 1093 Shiprock NM 87420

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

No 8 NAVAJO M 1985 FNL + 775 FEL  
Sec 34 Lease 14206035013 <sup>H</sup> 1/4-3/4-2N, R17W1

8. Well Name and No.

No 8 NAVAJO M

9. API Well No.

3004511193

10. Field and Pool, or Exploratory Area

Many Rocks

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  
☐ 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.)\*

No 8 Navajo M well remain as an injection well.

RECEIVED  
JUN - 6 1997

OIL CON. DIV.  
DIST. 3

070 INFORMATION NM  
97 JUN - 2 PM 3:01

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

Signed

William C. Bower

Title

Pres

Date

6-1-87

(This space for Federal or State office use)

Approved by

/S/ Duane W. Spencer

Title

Date

JUN - 4 1997

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 Instruction on Reverse Side

AMCO

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Cont. 14-20-603-5013

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo "M"

9. WELL NO.

8

10. FIELD AND POOL, OR WILDCAT

Many Rocks-Gallup

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

34-T32N-R17W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

1. OIL ☒ GAS ☐  
WELL WELL OTHER

2. NAME OF OPERATOR  
Skelly Oil Company

3. ADDRESS OF OPERATOR  
Box 3360, Casper, WY 82602

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

775' FEL & 1980' FNL  
(SE/4 NE/4)

14. PERMIT NO.

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

5904' DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐  
☐  
☐  
☐  
☐

PULL OR ALTER CASING

☐  
☐  
☐  
☐  
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

Temporarily ABandon

☒

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐  
☐  
☐  
☐  
☐

REPAIRING WELL

☐  
☐  
☐  
☐  
☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(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 pertinent to this work.)\*

A study is being made of this lease for possible recompletions in other zones and if successful, this injection well would be returned to production.

Permission is requested for continuation of TA status for one more year.

TEMPORARY ABANDONMENT  
EXPIRES

JUN 1 1977

RECEIVED

JUN 15 1976

U.S. GEOLOGICAL SURVEY

JUN 16 1976

W. CON. COM.

DIS. 3

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

SIGNED

*Roy J. McWhorter*

TITLE

Area Superintendent

DATE 6/11/76

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:



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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-85

5a. Indicate Type of Lease	
Fed <input checked="" type="checkbox"/> Indian	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
Fed. Cont #14-20-603-5013	

## 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL <input type="checkbox"/> GAS <input type="checkbox"/> OTHER- <b>Injection Well</b>		7. Unit Agreement Name
2. Name of Operator <b>Skelly Oil Company</b>		8. Farm or Lease Name <b>Navajo "M"</b>
3. Address of Operator <b>330 So. Center-Rm. 208, Casper, WY 82601</b>		9. Well No. <b>8</b>
4. Location of Well UNIT LETTER <b>H</b> <b>775</b> FEET FROM THE <b>E</b> LINE AND <b>1980</b> FEET FROM THE <b>N</b> LINE, SECTION <b>34</b> TOWNSHIP <b>32N</b> RANGE <b>17W</b> NMPM.		10. Field and Pool, or Wildcat <b>Many Rocks-Gallup</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>5904 DF</b>		12. County <b>San Juan</b>

### Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/> 7/3/74	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

### SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Injection is to be re-started in 1975.

Permission is requested for continuation of TA status for at least one year.



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

SIGNED *A. M. Whitte* TITLE Area Superintendent DATE 10/30/74

Original Signed by Emery G. Arnold

SUPERVISOR 1101.15

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

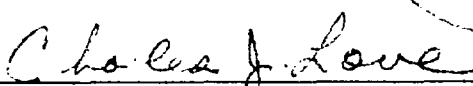
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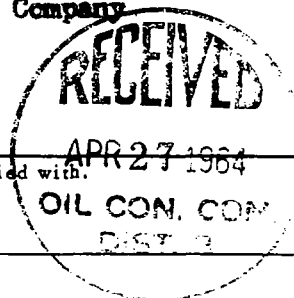
**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*B.T.*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "N"</b>		Well No. <b>8</b>	
Unit Letter <b>"M"</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>"M"</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 1588 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>  <b>None</b>		Date Connected	Address (give address to which approved copy of this form is to be sent)				
If gas is not being sold, give reasons and also explain its present disposition:  <b>Waiting on gas connection - Gas being vented.</b>							
<p align="center"><b>REASON(S) FOR FILING (please check proper box)</b></p> <div style="display: flex; justify-content: space-between;"> <div> <p>New Well ..... <input type="checkbox"/></p> <p>Change in Transporter (check one)</p> <p>Oil ..... <input checked="" type="checkbox"/> Dry Gas ..... <input type="checkbox"/></p> <p>Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/></p> </div> <div> <p>Change in Ownership ..... <input type="checkbox"/></p> <p>Other (explain below)</p> </div> </div>							
Remarks  <b>Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company</b>							
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the <b>24th</b> day of <b>April</b> , 19 <b>64</b>							
OIL CONSERVATION COMMISSION				By			
Approved by				 <b>Charles J. Love</b>			
Original Signed Emery C. Arnold				Title <b>Dist. Engineer</b>			
Title <b>Supervisor Dist. # 3</b>				Company <b>Skelly Oil Company</b>			
Date <b>APR 27 1964</b>				Address <b>Box 730 - Hobbs, New Mexico</b>			



DEVIATION AFFIDAVIT

Date July 23, 1963

New Mexico Oil Conservation Commission

1000 Rio Grande Road

Astec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

ILLEGIBLE

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of July 1963, Scott Bros. Drilling Company ran the following surveys for Skelly Oil Company on their Nevada SPN lease, Well No. 8, in SW 1/4 of SW 1/4 of Section 35-32N-17W NMPN, Mary Becka Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
500'	1/4		
1000'	1-1/4		
1500'	1-3/4		



Subscribed and sworn to before me this 23 day of July 1963

Jesse W. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

Name

J. W. George  
Assistant District Superintendent  
Position

Box 730, Hobbs, New Mexico  
Address

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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*B.T.*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Survey "A"</b>		Well No. <b>8</b>	
Unit Letter <b>H</b>	Section <b>24</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gulch</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>6</b>	Section <b>24</b>	Township <b>32N</b>	Range <b>17W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1340, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection.**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☒ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate . . ☐

**ILLEGIBLE**

Remarks

**Oil Transporter to be changed effective August 1, 1963**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with

Executed this the **22** day of **July**, 19**63**

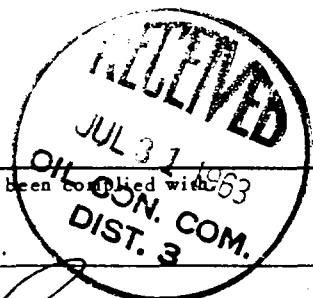
**OIL CONSERVATION COMMISSION**

Approved by  
**Original Signed By**  
**A. R. KENDRICK**

Title  
**PETROLEUM ENGINEER DIST. NO. 3**

Date  
**JUL 31 1963**

By  
*J. W. George*  
 Title  
**Assistant District Superintendent**  
 Company  
**Shelly Oil Company**  
 Address  
**Box 720, Hobbs, New Mexico**



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# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - ~~NEW~~ ALLOWABLE ILLEGIBLE

New Well

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico  
(Place)

April 30, 1963  
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company

Navajo

Well No. 8, in SE  $\frac{1}{4}$  NE  $\frac{1}{4}$ ,

(Company or Operator)

(Lease)

N

Sec. 24

T. 12N

R. 17W

NMPM., Undesignated Gallup

Pool

Unit Letter

San Juan

County. Date Spudded April 1, 1963

Date Drilling Completed April 4, 1963

Please indicate location:

Elevation 8977'

Total Depth 1789'

PBTD 1738'

Top Oil/Gas Pay 1738'

Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1732'-1738'

Open Hole —

Depth

Casing Shoe 1775'

Depth

Tubing 1724'

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls. water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 72 bbls. oil, 0 bbls. water in 24 hrs, 0 min. Size \_\_\_\_\_

GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated w/19,614 gals. lvs. oil & 25,000# 20/40 sand

Casing Press. \_\_\_\_\_ Tubing Press. \_\_\_\_\_ Date first new oil run to tanks April 15, 1963

Oil Transporter McWood Corporation

Gas Transporter \_\_\_\_\_

1963' FEET & 775' FEET

(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Size
<u>6-5/8"</u>	<u>30'</u>	<u>10</u>
<u>5-1/2"</u>	<u>1775'</u>	<u>75</u>
<u>2-3/8"</u>	<u>1769'</u>	<u>—</u>

Remarks: Well pumped 72 barrels oil in 24 hours.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved APR 30 1963, 19\_\_\_\_\_

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

SKELLY OIL COMPANY

(Company or Operator)

By: J. W. George

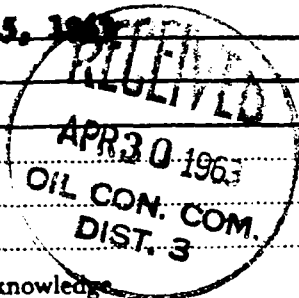
(Signature)

Title Asst. Dist. Supt.

Send Communications regarding well to:

Name Skelly Oil Company

Box 38, Hobbs, New Mexico



DEVIATION AFFIDAVIT

Date April 30, 1963

New Mexico Oil Conservation Commission

1000 Rio Pecos Road

Artes, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

J. M. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of April 1963, Scott Bros. Drilling Co. ran the following surveys for Skelly Oil Company on their Lease lease, Well No. 2, in 1/4 of SE 1/4 of Sec. 34-36-17N NMPH, Undesignated Galing Pool, San Juan County, New Mexico.

SLOPE TEST DATA

Depth In

Angle in Degrees

Depth In

Angle in Degrees

482'

1/2

937'

3/4

1399'

1

ILLEGIBLE

Subscribed and sworn to before me this 30th day of April 1963

Esse W. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

J. M. George  
Name

Assistant District Superintendent  
Position

Box 18, Hobbs, New Mexico  
Address



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TRANSPORTER	OIL		
PRODUCTION OFFICE			
OPERATOR			

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo WHP</b>		Well No. <b>8</b>	
Unit Letter <b>H</b>	Section <b>34</b>	Township <b>30N</b>	Range <b>17W</b>		County <b>San Juan</b>		
Pool <b>Undesignated - Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>G</b>	Section <b>33</b>	Township <b>32</b>	Range <b>17</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>McNee Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>530 Petroleum Bldg., Abilene, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection**

**REASON(S) FOR FILING (please check proper box)**

New Well ☒ Change in Ownership ☐  
 Change in Transporter (check one) Other (explain below) ☐  
 Oil ☐ Dry Gas ☐  
 Casing head gas ☐ Condensate ☐

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 30th day of April, 1963.

OIL CONSERVATION COMMISSION		By <i>J. W. George</i>
Approved by <b>Original Signed Emery C. Arnold</b>	Title <b>Asst District Supt.</b>	
Title <b>Supervisor Dist. # 3</b>	Company <b>Skelly Oil Company</b>	
Date <b>APR 30 1963</b>	Address <b>Box 38, Hobbs, New Mexico</b>	

Heaving plug—Material ..... Length ..... Depth set .....  
Adapters—Material ..... Size .....

### SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 5-1/2" 80 casing perfor. 1732-1738' with 19,614 gallons lease oil 25,000# 20/40 sand & 12 ball sealers.						

### TOOLS USED

Rotary tools were used from 0 feet to 1732 feet, and from ..... feet to ..... feet  
Cable tools were used from ..... feet to ..... feet, and from ..... feet to ..... feet

### DATES

....., 19..... Put to producing April 15, ..... 1963  
The production for the first 24 hours was 72 barrels of fluid of which 99.9% was oil; .1%  
emulsion; .....% water; and .....% sediment. Gravity, °Bé. 41.2  
If gas well, cu. ft. per 24 hours ..... Gallons gasoline per 1,000 cu. ft. of gas .....  
Rock pressure, lbs. per sq. in. ....

### EMPLOYEES

Johnston, Driller ..... Driller  
Candill, Driller ..... Driller

### FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	280	280	Sandstone
280	1408	1128	Shale - Top Mancos - 280'
1408	1593	185	Shale - Top ... - 1408'
1593	1731	138	Sand & Shale - Top Lower Gallup - 1593'
1731	1749	18	Sand & Shale - Top Tecite Sand - 1731'
1749	1780	31	Shale & Limestone - Top Sanastee - 1749'
	1780		Total Depth
	1759		Plug Back Total Depth
Geological Tops by Schlumberger Induction - Gamma Ray Log			

COKE NO. 1 - 1720' - 1740' (20') Recovered 20'

Top - 10'-6" - Black shale with sand stringers  
Next - 6'-0" - Sandstone, med. grained w/ carbon streaks, all 6' oil saturated  
Next - 3'-6" - Black shale with streaks of lime

ILLEGIBLE

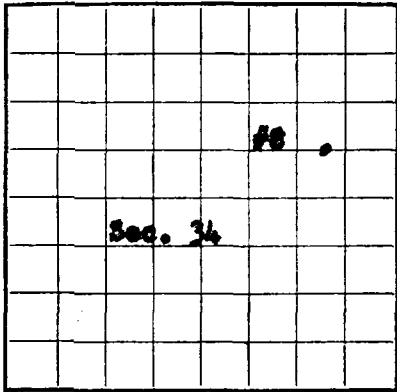
FROM—	TO—	TOTAL FEET	FORMATION
-------	-----	------------	-----------

FORMATION RECORD—Continued

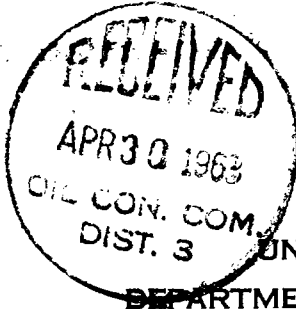


ILLEGIBLE

Form 9-330



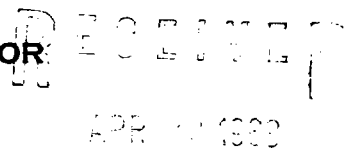
LOCATE WELL CORRECTLY



Form approved.  
Budget Bureau No. 42-R355.4.

U. S. LAND OFFICE Window Rock  
SERIAL NUMBER 14-20-603-5013  
LEASE OR PERMIT TO PROSPECT Navajo "M"

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY



U. S. GEOLOGICAL SURVEY  
WASHINGTON, NEW MEXICO

## LOG OF OIL OR GAS WELL

Company Skelly Oil Company Address Box 25 - Hobbs, New Mexico  
Lessor or Tract Navajo "M" Field Hornashee Gallup State New Mexico  
Well No. 8 Sec. 34 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
Location 1980 ft. [S.] of N Line and 775 ft. [W.] of E Line of Section 34 Elevation 5899  
(Derrick floor relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Signed (ORIGINAL) H. E. Aeb

Date April 26, 1963 Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

Commenced drilling April 1, 1963 Finished drilling April 4, 1963

### OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1731' to 1737' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

### IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

### CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
8-5/8"	31'	10	By Hand						
5-1/2"	1775'	75	Pump & Plug						

### MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
8-5/8"	31'	10	By Hand		
5-1/2"	1775'	75	Pump & Plug		

73	.
Section 34	



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Budget Bureau No. 43-2388.4  
Approval expires 12-31-63

Indian Agency Navajo Tribe

Allottee Navajo Tribe

Lease No. 14-22-403-923

## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL.....	SUBSEQUENT REPORT OF WATER SHUT-OFF.....	<b>XX</b>
NOTICE OF INTENTION TO CHANGE PLANS.....	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.....	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.....	SUBSEQUENT REPORT OF ALTERING CASING.....	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL.....	SUBSEQUENT REPORT OF REDRILLING OR REPAIR.....	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE.....	SUBSEQUENT REPORT OF ABANDONMENT.....	
NOTICE OF INTENTION TO PULL OR ALTER CASING.....	SUPPLEMENTARY WELL HISTORY.....	
NOTICE OF INTENTION TO ABANDON WELL.....	<u>Perforate &amp; Produce</u>	<b>XX</b>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

May 22, 1963

Navajo Tribe  
Well No. 5 is located 1900 ft. from N line and 775 ft. from E line of sec. 34

22-N 17-W H.M.P.M.  
(4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)

Marathon Gallup San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5099 ft.

MAY 21 1963

### DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Well spudded April 1, 1963. Set 5-5/8" OD casing at 31' and cemented with 10 sacks by hand. W.O.G. Drilled to 1720'.

Core No. 1 - 1720' - 1740' (20') - Recovered 20'

Top - 18' - 6" - Black shale with sand stringers

Next - 6' - 0" - Sandstone, Med. grained with carbon streaks, all 6' oil saturated

Next - 3' - 6" - Black shale with streaks of lime

Reached total depth of 1780' on April 4, 1963. Set 5-1/2" OD casing at 1775' and cemented with 75 sacks. W.O.G. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1799'. P.B.T.D. 1799'. Perforated 5-1/2" OD casing from 1732-1738' for a total of 6' and 24 holes. Treated through 5-1/2" OD casing perfor. 1732-1738' with 19,614 gals. lvs. oil and 25,000# 20/40 sand & 12 ball sealers. (See Reverse Side)

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 36

Hobbs, New Mexico

ILLEGIBLE

(ORIGINAL SIGNED) H. E. Asb

By

Title Dist. Supt.

# NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

Date March 29, 1963  
Operator SKELLY OIL COMPANY  
Well No. 1 Unit Center 2 Section 34 Township 34 North Range 32 West NMPM  
Estimated 1963 Feet From North Line 775 Feet From East Line  
County San Juan S. L. Elevation 5899 Dedicated Acreage 40 Acres  
Name of Producing Formation Gallup Pool Undesignated Gallup

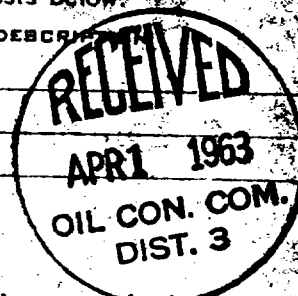
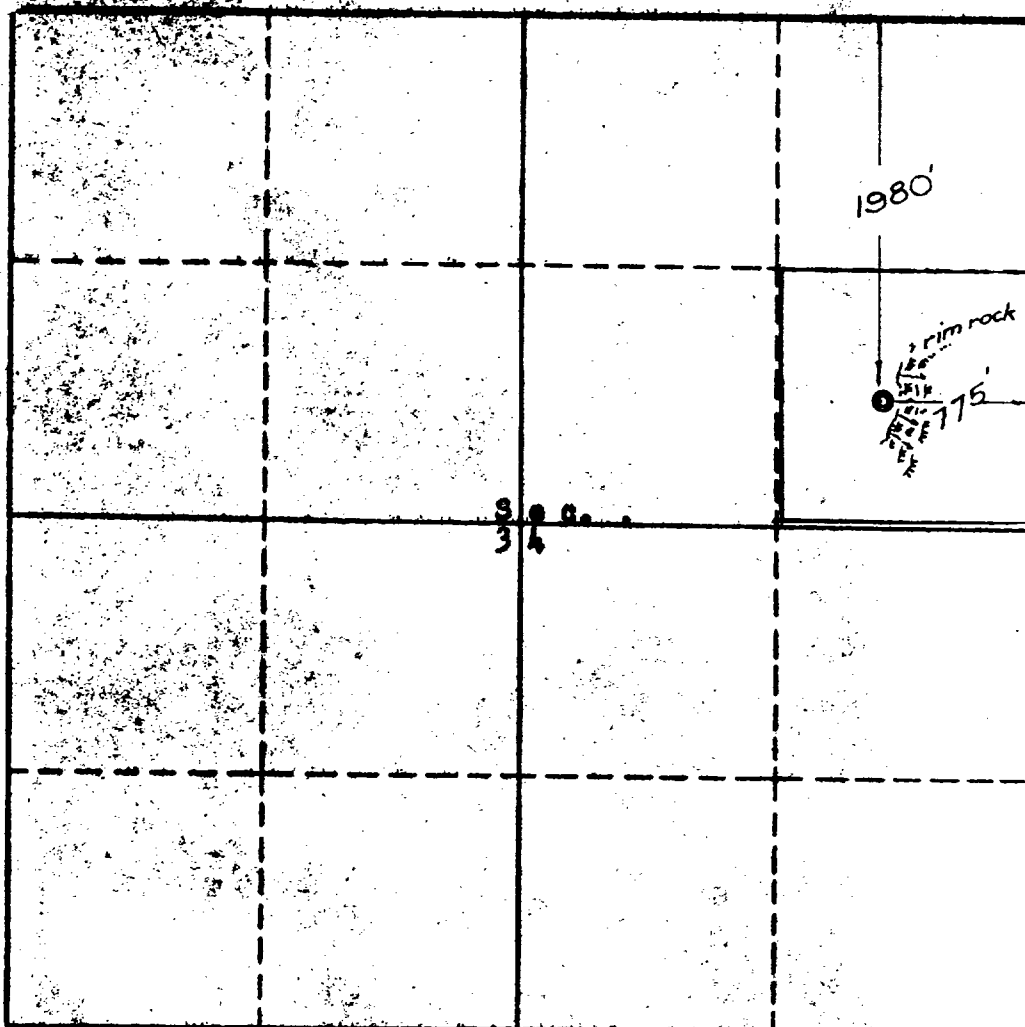
1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes No If answer is "Yes," Type of Consolidation
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

ILLEGIBLE

### SECTION B



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY

(OPERATOR)

*J. W. George*  
(REPRESENTATIVE)  
Box 38, Hobbs, New Mexico

(ADDRESS)

This is to certify that the well location shown on the plat in Section B 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 Mar. 28, 1963

Four States Engineering Co.  
FARMINGTON, NEW MEXICO

*Edward H. Carlshaw*  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602



(SUBMIT IN TRIPLICATE)

Indian Agency Mineral Park

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY**

Allottee \_\_\_\_\_

Lease No. 14-30-40-200


**SUNDRY NOTICES AND REPORTS ON WELLS**

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	<b>RECEIVED</b> <b>MAR 29 1963</b> <b>U. S. GEOLOGICAL SURVEY</b> <b>FARMINGTON, NEW MEXICO</b>
NOTICE OF INTENTION TO CHANGE PLANK	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL		

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

March 29, 1963

Well No. 8 is located 2000 ft. from N line and 775 ft. from E line of sec. 34  
NE/4 Sec. 34 (1/4 Sec. and Sec. No.)  
Unidentified Gallup (Field)  
San Juan (County or Subdivision)  
New Mexico (State or Territory)

The elevation of the derrick floor above sea level is 5877 ft. (cont.)

**DETAILS OF WORK**

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 8 to around 1760' to test Gallup formation. Our casing program is as follows:

- 35' - 2-5/8" ID 20# J-55 casing - To be cemented with 10 sacks regular cement.
- 1730' - 5/8" ID 14-1/2" J-55 casing - To be cemented with 50 sacks regular cement 1/4" gal and 25# gilsonite per sack and 25 lbs. regular 1/2" calcium chloride.

**ILLEGIBLE**



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

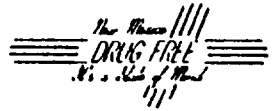
Company SHILLY OIL COMPANY  
P. O. Box 30  
Hobbs, New Mexico  
 Address \_\_\_\_\_

By J. W. George  
 Title Assistant District Superintendent



STATE OF NEW MEXICO

ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE



BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

August 18, 1992

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: ~~Navajo~~ M #8, H-34-32N-17W

Dear Mr. Woosley:

The New Mexico Oil Conservation Division, as part of its Underground Injection Control authority, requires A.P.A. Development to perform an MIT on the above injection well once every five years. An MIT has not been conducted on this well.

The mechanical integrity of the casing-tubing annulus is tested by submitting the annulus to a pressure of 300 psi for 30 minutes with less than ten percent bleed-off as outlined in Commission Rule 704. A.P.A. is required to complete the MIT by March 1, 1993.

We require a 24 to 48 hour notice so that we may be present to witness testing. A.P.A. Development will furnish personnel and equipment to complete the tests.

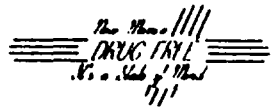
If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

XC: David Catanach-UIC Director  
George Robin-EPA  
UIC File  
Well File



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DIVISION  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87100  
(505) 334-6178

June 18, 1993

APA Development Corp.  
PO Box 215  
Cortez, CO 81321

RE: Navajo M #8, H-34-32N-17W

To Whom It May Concern:

The New Mexico Oil Conservation Division, as part of its Underground Injection Control authority, requires all operators of Class II injection wells to perform an MIT once every five years. This office has no record of an MIT for the above mentioned well. An MIT is due on this well on or before December 15, 1993. Failure to comply will result in the termination of your authorization to inject.

The mechanical integrity of the casing-tubing annulus is tested by submitting the annulus to a pressure of 300 psi for 30 minutes with less than ten percent bleed-off as outlined in Commission Rule 704.

We require a 24 to 48 hour notice so that we may be present to witness testing. All testing schedules should be coordinated through Dianna Fairhurst at 505-334-6178. APA will furnish personnel and equipment to complete the test.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

XC: David Catanach-UIC Director  
UIC File  
Well File  
Jim Walker-Navajo EPA

APPLICATION OF SKELLY OIL COMPANY  
TO EXPAND ITS MANY ROCKS-GALLUP  
PRESSURE MAINTENANCE PROJECT NO. 3  
IN THE MANY ROCKS-GALLUP OIL POOL  
IN SAN JUAN COUNTY, NEW MEXICO.

ADMINISTRATIVE ORDER  
PMX-13

ADMINISTRATIVE ORDER  
OF THE OIL CONSERVATION COMMISSION

Under the provisions of Order No. R-2664, Skelly Oil Company has made application to the Commission on November 9, 1964, for permission to expand its Many Rocks-Gallup Pressure Maintenance Project No. 3 in the Many Rocks-Gallup Oil Pool, San Juan County, New Mexico.

NOW, on this 30th day of December, 1964, the Secretary-Director finds:

1. That application has been filed in due form.
2. That satisfactory information has been provided that all offset operators have been duly notified of the application.
3. That objection lodged by the State Engineer has been withdrawn.
4. That the proposed injection wells are eligible for conversion to water injection under the terms of Order No. R-2664.
5. That the proposed expansion of the above-referenced pressure maintenance project will not cause waste nor impair correlative rights.
6. That the application should be approved.


IT IS THEREFORE ORDERED:

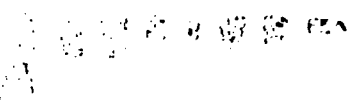
That the applicant, Skelly Oil Company, be and the same is hereby authorized to inject water into the Gallup formation through the following described wells for purposes of Pressure Maintenance, to wit:

Navajo "M" Well No. 8 located in the SE/4 NE/4 of Section 34,  
Navajo "M" Well No. 12 located in the NE/4 NW/4 of Section 34,  
Navajo "P" Well No. 7 located in the NW/4 SE/4 of Section 35,  
Navajo "P" Well No. 9 located in the SE/4 NW/4 of Section 35,  
and Navajo "P" Well No. 11 located in the NW/4 NW/4 of Section 35, all in Township 32 North, Range 17 West, NMPM,

DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.

STATE OF NEW MEXICO  
OIL CONSERVATION COMMISSION

  
A. L. PORTER, Jr.,  
Secretary-Director



APR 27 1992

OIL CON. DIV  
DIST. 3

SEAL

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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

I. Operator  
Getty Oil Company  
Address  
P. O. Box 3360, Casper, WY 82602  
Reason(s) for filing (Check proper box)  
New Well ☐ Change In Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change In Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
If change of ownership give name and address of previous owner  
Skelly Oil Company, BOX 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 8	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee	Lease No. 14-20-6-3-5013
Location Unit Letter H : 1980 Feet From The North Line and 775 Feet From The East Line of Section 34 Township 32N Range 17W , 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"/> Injection Well (TA)	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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.	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.
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)

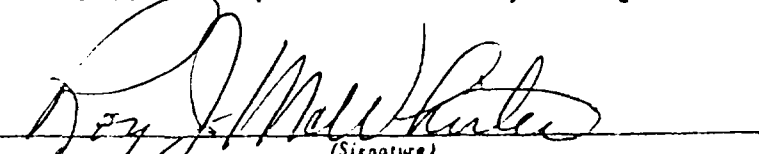
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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

  
(Signature)  
Area Superintendent  
(Title)  
3/2/77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY ORIGINAL SIGNATURE OF MAXWELL, JR.  
TITLE PETROLEUM ENGINEER, JR., 60, 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Form C-104 must be filed for each pool in multiply completed wells.



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	GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602	

I. DESCRIPTION OF WELL AND LEASE				
Lease Name Navajo "M"	Well No. 8	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-603-5013
Location H 775 East 1980	Unit Letter e 990	Feet From The North	Line and 1650	Feet From The North
Line of Section 33	Township 32N	Range 17W	NMPM, San Juan	County

I. 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)
Injection well (TA)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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:

V. 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

VI. 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

I. CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
James P. Hooley (Signature) co-operator (Title) Sept 11, 1979 (Date)	
OIL CONSERVATION COMMISSION APPROVED SEP 12 1979 Original Signed by E. K. Anderson BY TITLE SUPERVISOR DISTRICT # 3 This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.	

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-85

I. Operator  
BayStar Petroleum Corporation  
Address  
P. O. Box 2975, Corpus Christi, Texas 78403  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐ Other (Please explain)  
Injection Well  
If change of ownership give name and address of previous owner  
WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 8	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-603-5013
Location Unit Letter H ; 1980 Feet From The North Line and 775 Feet From The East Line of Section 34 Township 32N Range 17W , 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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
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:

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, CR, 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 8, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 13 1985  
BY Frank J. [Signature]  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

API NUMBER 30-045-11154

OPERATOR NAME APA DEVELOPMENT CORP

WELL NUMBER

8

PROPERTY NAME NAVAJO P

SECTION 35 TOWNSHIP 32N

RANGE 17W

FOOTAGE 660 FSL 660 FWL UL "M"

Sur Csg OD NA HOLE	7 5/8	XX		XX
SUR CSG TD	28	XX		XX
SUR CSG WT	17.7	XX		XX
TOP OF CMT	0	XX		XX
ACTUAL		XX		XX
CACULATED	10SX	XX		XX
PROD CSG OD 6 1/4	4 1/2	XX		XX
PROD CSG TD	1766	XX		XX
PROD CSG WT	9.5	XX		XX
TOP OF CMT	911	XX	XX	XX
FORMATION TOP	ACTUAL	EST	XX	XX
GALLUP 1506'	CACULATED	100SX	XX	XX
1379	PERF TOP	1713	XX	XX
Mancos 260	PERF BOTTOM	1718	XX	XX
	PACKER		XX	XX
	TYPE OF PLUG		XX	XX
	CIBP & CMT		XX	XX
	CMT		XX	XX

### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOOH W/TUBING, PICK UP WORK STRING, CIRC HOLE

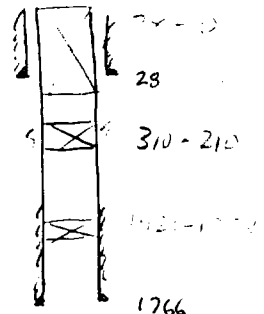
SPOT 14 SX PLUG @ <sup>1429 1279</sup>~~1616-1466~~, WOC TAG, FILL AS REQUIRED

PERF @ 78' CIRC CEMENT TO SURFACE, EST 17 SX

CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS,

Close pits according to guidelines: Clean and level location

Plug Mancos - 310 - 210 inside + outside 4 1/2" casing





APA Development.  
NAVAJO m #9  
A-34-32N-17W  
660N 660E  
45-11211

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

5. Lease Designation and Serial No.  
**14-20-603-5013**

6. If Indian, Allottee or Tribe Name  
**Navajo Tribe**

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
**9 Navajo M**

9. API Well No.  
**30045 11210**

10. Field and Pool, or Exploratory Area

11. County or Parish, State  
**San Juan, NM**

**SUBMIT IN TRIPLICATE**

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator **APA Development**  
**% NMOCO**

3. Address and Telephone No.  
**1000 Rio Grande Rd. Aztec NM 87410 334-6178**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**34-32N-17W 660/N-660/E**

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 \_\_\_\_\_
- ☐ 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.)\*

*See attached plugging procedure.*

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

Signed **NMOCO Contract Plugging**

Date **8/11/00**

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date **8/17/00**

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

**API NUMBER** 30-045-11210  
**OPERATOR NAME** APA DEVELOPMENT CORP **WELL NUMBER** 9  
**PROPERTY NAME** NAVAJO M  
**SECTION 34** TOWNSHIP 32N **RANGE** 17W  
**FOOTAGE** 660 FNL 660 FEL UL "A"

Sur Csg OD	NA HOLE	8 5/8	XX	XX	XX	XX
SUR CSG TD		24	XX	XX	XX	XX
SUR CSG WT		32	XX	XX	XX	XX
TOP OF CMT		0	XX	XX	XX	XX
ACTUAL			XX	XX	XX	XX
CACULATED		10SX	XX	XX	XX	XX
PROD CSG OD	6 1/4	5	XX	XX	XX	XX
PROD CSG TD		1802	XX	XX	XX	XX
PROD CSG WT		9.5	XX	XX	XX	XX
TOP OF CMT			XX	XX	XX	XX
FORMATION TOP	ACTUAL	EST		XX	XX	
GALLUP 1435'	CACULATED	75SX		XX	XX	
MANCOS 320	PERF TOP	1762		XX	XX	
	PERF BOTTOM	1769		XX	XX	
	PACKER			XX	XX	
	TYPE OF PLUG			XX	XX	
	CIBP & CMT			XX	XX	
	CMT			XX	XX	

#### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOOH W/ RODS AND TUBING,PICK UP WORK STRING, CIRC HOLE

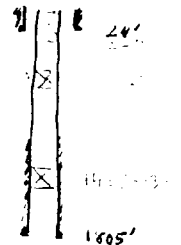
**SPOT 16 SX PLUG 1485-1335, WOC TAG FILL AS REQUIRED,**

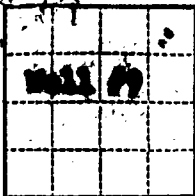
PERF @ 370 PUMP 32 SX 370-270, 18 SX OUTSIDE CSG, 14 SX INSIDE CSG

PERF @ 82' CIRC CMT TO SURFACE, EST 14SX

CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS

**Close pits according to guidelines: Clean and level location**





(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Budget Bureau No. 42-R350.4  
Approval expires 12-31-60.

Indian Agency Window Rock

Allottee \_\_\_\_\_

Lease No. 14-20-400-9013

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

RECEIVED  
APR 24 1963  
U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

April 24, 1963

Well No. 9 is located 660 ft. from [N] line and 660 ft. from [E] line of sec. 24  
NE 1/4 Sec. 24 12N 17W 100M  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Undesignated Gallup San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 9921 ft. (est.)

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 9 to around 1810' to test Gallup formation. Our casing program is as follows:

- 30' - 8-5/8" OD 12# J-55 Casing - To be cemented with 10 sacks regular cement.
- 1805' - 5" OD 11.5# & 13# J-55 Casing - To be cemented with 75 sacks regular cement w/4% gal and 25% gilsonite per sack and 25 sacks regular w/2% calcium chloride.

ILLEGIBLE



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY

Address P. O. Box 38

Hobbs, New Mexico

By J. W. George  
Title Assistant District Superintendent



## NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

## SECTION A.

Date April 24, 1963

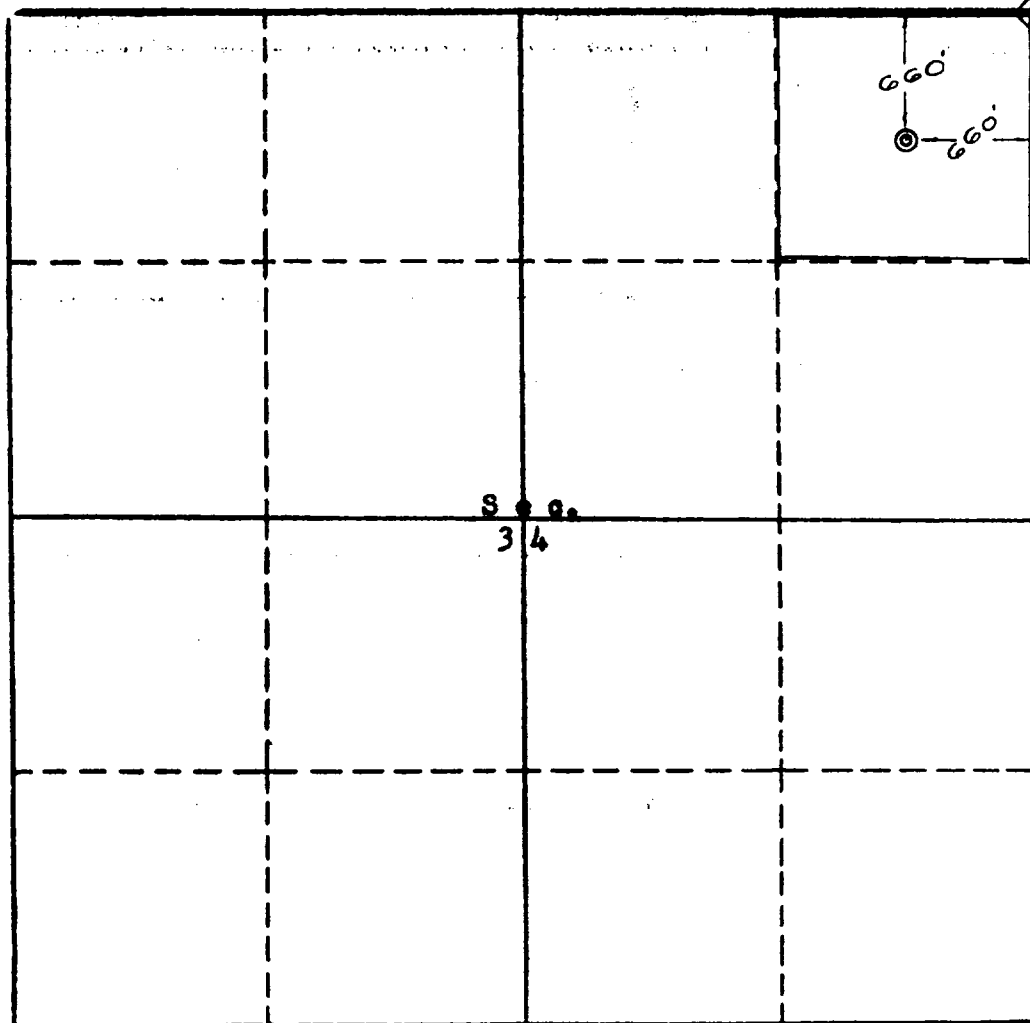
Operator Skelly Oil Company Lease Navajo "M"  
 Well No. 9 Unit Letter A Section 34 Township 32 North Range 17 West NMPM  
 Located 660 Feet From North Line, 660 Feet From East Line  
 County San Juan G. L. Elevation 5931 Dedicated Acreage 40 Acres  
 Name of Producing Formation Gallup Pool Undesignated Gallup

1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes x No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_. If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

## SECTION B.



RECEIVED  
 APR 26 1963  
 OIL CON. COM.  
 DIST. 3

This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY

(OPERATOR)

*J. W. George*  
 (REPRESENTATIVE)  
 Box 38, Hobbs, New Mexico

(ADDRESS)

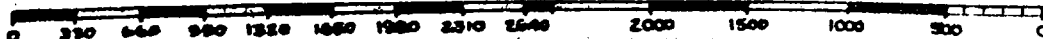
This is to certify that the well location shown on the plat in Section B was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed April 23, 1963

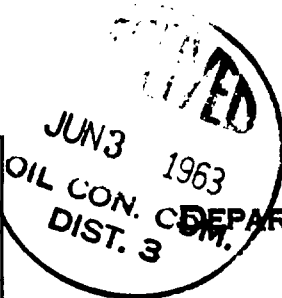
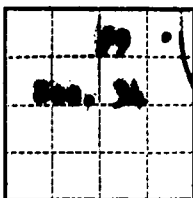
Four States Engineering Co.

FARMINGTON, NEW MEXICO

*James V. Canham*  
 REGISTERED ENGINEER OR  
 LAND SURVEYOR

Certificate No. 3602





(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Budget Bureau No. 43-2386.4  
Approval expires 12-31-60.

Indian Agency **Navajo Tribal**

Allottee **Navajo "M"**

Lease No. **14-22-603-3013**

## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	<b>XX</b>
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	<b>Perforated &amp; Fracture</b>	<b>XX</b>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

**May 22,** 1963

**Navajo "M"**  
Well No. **9** is located **660** ft. from **N** line and **660** ft. from **E** line of sec. **34**

**NE/4 NE/4 Sec. 34**  
(1/4 Sec. and Sec. No.)

**12-N**  
(Twp.)

**17-W**  
(Range)

**N.M.P.M.**  
(Meridian)

**Horseshoe Gallup**  
(Field)

**San Juan**  
(County or Subdivision)

**New Mexico**  
(State or Territory)



The elevation of the derrick floor above sea level is **5931** ft.

**MAY 31 1963**

### DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate anticipated casing points, and all other important proposed work)

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

Well spudded April 24, 1963. Set 8-5/8" OD casing at 24' and cemented with 10 sacks by hand. W.O.C. Drilled to 1750'.

**Core No. 1 - 1750' - 1762'-6" - (19'-6") - Recovered 19' - 6"**

Top - 6' - 0" - Dark gray shale

Next - 4' - 6" - Silty gray shale

Next - 1' - 0" - Dark shale and shaley sand

Next - 1' - 0" - Interbedded sand & shale, glauconitic with stain and odor

Next - 7' - 0" - Sand, glauconitic, oil saturated

Reached total depth of 1805' on April 27, 1963. Set 5" OD casing at 1802' and cemented with 75 sacks, W.O.C. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1792'. F.B.T.D. 1792'. Perforated 5" OD casing from 1762-1769' for a total of 7' and 28 holes. Treated through 5" OD casing perfor. 1762-1769' with 30,660 gals. of lease oil & 30,000# 20/40 sand. After recovering all lease oil well pumped 26 barrels of oil in 24 hours.

Company **Skelly Oil Company**

Address **Box 38**

**Hobbs, New Mexico**

(ORIGINAL)  
(SIGNED) **H. E. Asb**

By

Title **Dist. Supt.**

ILLEGIBLE

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TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "T"</b>		Well No. <b>9</b>	
Unit Letter <b>A</b>	Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Undesignated Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal-Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>C</b>	Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>McWood Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>330 Petroleum Bldg., Abilene, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

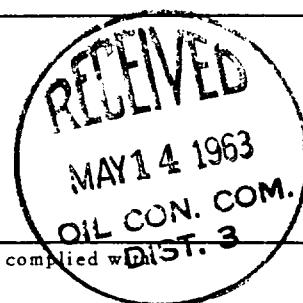
**Gas vented - waiting for gas connection**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

**ILLEGIBLE**

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with

Executed this the **13th** day of **May**, 19 **63**.

**OIL CONSERVATION COMMISSION**

Approved by

**Original Signed Emery C. Arrowood**

Title

**Superior Dist. # 3**

Date

**MAY 14 1963**

By

Title

**Asst. Dist. Supt.**

Company

**Skelly Oil Company**

Address

**Box 38, Hobbs, New Mexico**

NUMBER OF COPIES RECEIVED		4	
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SANTA FE			
FILE			
U.S.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
PRODUCTION OFFICE			
OPERATOR			

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Parlington, New Mexico

May 13, 1963

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Shelly Oil Company

Navajo "N"

Well No. 9, in NE  $\frac{1}{4}$  NE  $\frac{1}{4}$ ,

(Company or Operator)

(Lease)

A

Sec. 34

T. 32N

R. 17W

NMPM,

Undesignated Gallup

Pool

Unit Letter

San Juan

County. Date Spudded 4/24/63

Date Drilling Completed 4/27/63

Please indicate location:

Elevation 5927'

Total Depth 1895' PBD 1792'

Top Oil/Gas Pay 1762'

Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1762'-1769'

Open Hole

Depth

Casing Shoe 1802'

Depth

Tubing 1769'

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 86 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size \_\_\_\_\_

GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated w/ 30,660 gals. 12% oil & 30,000# 20/40 sand

Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
Press. \_\_\_\_\_ Press. \_\_\_\_\_ oil run to tanks May 10, 1963

Oil Transporter McWood Corporation

Gas Transporter \_\_\_\_\_

Remarks: Well pumped 86 barrels oil in 24 hours.

ILLEGIBLE

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved \_\_\_\_\_, 1963

Shelly Oil Company

(Company or Operator)

By: \_\_\_\_\_

(Signature)

Title

Asst. Dist. Supt.

Original Signed Emery C. Arnold

Title Superior Dist. #3

Send Communications regarding well to:

Shelly Oil Company

Box 38, Hobbs, New Mexico

DEVIATION AFFIDAVIT

Date May 13, 1963

New Mexico Oil Conservation Commission

1000 Ma Brava Road

Astec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of May 19 63 Scott Bros. Drilling Co. ran the following surveys for Skelly Oil Company on their Navajo NW lease, Well No. 9, in NE 1/4 of NE 1/4 of Sec. 16-12N-17W NMPH, Undesignated Galloway Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
<u>510'</u>	<u>1/4</u>		
<u>1000'</u>	<u>1.0</u>		
<u>1500'</u>	<u>1.0</u>		

ILLEGIBLE

Subscribed and sworn to before me this 13th day of May 19 63

Jesse W. Thompson  
Notary Public in and for said County and State

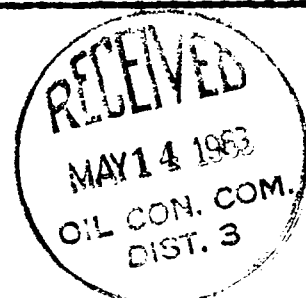
My Commission expires: 3-16-67

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

Name J. W. George

Assistant District Superintendent  
Position

Box 38  
Hobbs, New Mexico  
Address



NUMBER OF COPIES RECEIVED	
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FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*BT.*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Marajo "E"</b>		Well No. <b>9</b>	
Unit Letter <b>A</b>	Section <b>24</b>	Township <b>32N</b>	Range <b>17W</b>		County <b>San Juan</b>		
Pool <b>Mary Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>C</b>	Section <b>24</b>	Township <b>32N</b>	Range <b>17W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1568, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection.**

**REASON(S) FOR FILING (please check proper box)**

- |  |  |
|--|--|
| New Well <input type="checkbox"/>  | Change in Ownership <input type="checkbox"/> |
| Change in Transporter (check one)  | Other (explain below)                        |
| Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>     |  |
| Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/> |  |

**ILLEGIBLE**

Remarks  <b>Oil transporter to be changed effective August 1, 1963.</b>
---

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 21 day of August, 19 63.



OIL CONSERVATION COMMISSION		By <i>J. W. George</i>
Approved by Original Signed By <b>A. R. KENDRICK</b>		Title <b>Assistant District Superintendent</b>
Title <b>PETROLEUM ENGINEER DIST. NO. 3</b>		Company <b>Shelly Oil Company</b>
Date <b>JUL 31 1963</b>		Address <b>Box 730, Hobbs, New Mexico</b>

NUMBER OF COPIES RECEIVED	
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FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "M"</b>		Well No. <b>9</b>	
Unit Letter <b>"A"</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>"M"</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1588 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> <b>None</b>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Waiting on gas connection - Gas being vented.**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☒ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

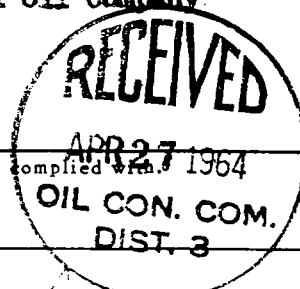
**TRANSPORTER CHANGED FROM SHELL OIL COMPANY TO SHELL PIPE LINE CORPORATION EFFECTIVE 12/31/69**

Remarks

**Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **24th** day of **April**, 19 **64**



OIL CONSERVATION COMMISSION		By <b>Charles J. Love</b>
Approved by <b>Original Signed Emery C. Arnold</b>		Title <b>Dist. Engineer</b>
Title <b>Supervisor Dist # 3</b>		Company <b>Skelly Oil Company</b>
Date <b>APR 27 1964</b>		Address <b>Box 730 - Hobbs, New Mexico</b>

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. <b>14-20-603-3014</b>
2. NAME OF OPERATOR <b>Shelly Oil Company</b>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Navajo Tribe</b>
3. ADDRESS OF OPERATOR <b>1860 Lincoln Street, Denver, Colorado 80203</b>	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>660' FNL &amp; 660' FNL, Section 34-32N-17W or NE/4 NE/4, Section 34</b>	8. FARM OR LEASE NAME <b>Navajo "M"</b>
14. PERMIT NO.	9. WELL NO. <b>9</b>
15. ELEVATIONS (Show whether DF, RT, CR, etc.) <b>5931 DF</b>	10. FIELD AND POOL, OR WILDCAT <b>Many Rocks Oilfield</b>
	11. SEC. T. R. M., OR BLK. AND SURVEY OR AREA <b>34-32N-17W</b>
	12. COUNTY OR PARISH <b>San Juan</b>
	13. STATE <b>New Mexico</b>

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

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

(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 pertinent to this work.)\*

9/26/67: Pulled rods and tubing. Ran sand oil treatment through 5-1/2" casing. Perforations 1762'-1769' with 3200 gallons of oil and 4,000# 20-40 sand and 250# of Para-Chek; maximum treating pressure 1300#; minimum 1100#; instant sand pressure 800#; on vacuum in 30 minutes; average injection rate 5 barrels per minute. Ran sand pump and found frac sand at 1728'. Cleaned out sand 1728'-1792'. Ran tubing and rods. Set pump at 1758'. Tubing perforations 1758'-1761'. Mud anchor at 1768'.

9/28/67: POB 18 hours 15/30" SPM, 86 barrels load oil.

9/29/67: POB 24 hours 16/30" SPM, 60 barrels formation oil and 5 barrels load oil.

9/30/67: POB 24 hours 16/30" SPM, 55 barrels formation oil, no water.

10/1/67: POB 19 hours 16/30" SPM, 47 barrels formation oil, no water.

10/2/67: POB 24 hours 15/30" SPM, 55 barrels formation oil, no water.



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

SIGNED *John A. Starnes*TITLE District SuperintendentDATE October 6, 1967

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

OCT 9 1967

\*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY  
GAINING PL. N.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ well ☒ gas well ☐ other

2. NAME OF OPERATOR  
WTR OIL COMPANY

3. ADDRESS OF OPERATOR  
Drawer LL, Cortez, Colo 81321

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 660' FNL-660' FEL Sec 34 T32N R17W  
AT SURFACE: 5931  
AT TOP PROD. INTERVAL: 1762'  
AT TOTAL DEPTH: 1792

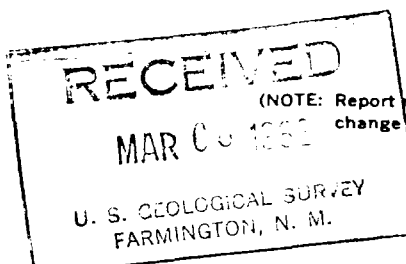
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☒  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐



5. LEASE  
14-20-603-5013

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Navajo Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Navajo M

9. WELL NO.  
# 9

10. FIELD OR WILDCAT NAME  
Many Rocks - Gallup

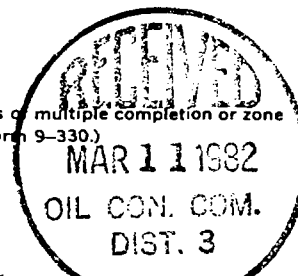
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
660' FNL-660' FEL  
Sec. 34-T32N-R17W

12. COUNTY OR PARISH  
San Juan

13. STATE  
New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5931



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 pertinent to this work.)\*

We propose to remove the rods, pump and tubing. Run a string of 2 3/8" UP tubing with a packer set at 1750' and acidize through the tubing, through the 5" OD casingperfs at 1762'-1769' with Halliburton 15% acid, 1000 gallons and flush out tubing with approx. 8 BBLS water. We will then swab out all the spent acid and unset packer and pull same from well and run back in the tubing, pump and rods.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED James F. Sims TITLE Office Manager DATE March 3-1982

APPROVED BY John Bell (Space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: MAR 6 1982  
For JAMES F. SIMS  
DISTRICT ENGINEER

\*See Instructions on Reverse Side

ah 7

NMOCC



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## 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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐  
well well other

2. NAME OF OPERATOR

WTR Oil Company

3. ADDRESS OF OPERATOR

Drawer LL, Cortez, Colo 81321

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 660' FNL-660' FEL Sec 34, T32N, R17W

AT SURFACE: 5931

AT TOP PROD. INTERVAL: 1762'

AT TOTAL DEPTH: 1792'

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐CHANGE ZONES ☐ABANDON\* ☐

(other)

SUBSEQUENT REPORT OF:

☐☐☒☐☐☐☐☐☐RECEIVED  
DEC 15 1982U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

(NOTE: Report results of multiple completion or zone change on Form 9-330.)

5. LEASE

14-20-603-5013

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo M

9. WELL NO.

9-

10. FIELD OR WILDCAT NAME

Many Rocks Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 660' FNL-660' FEL Sec 34

T32N, R17W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD) 5931

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 pertinent to this work.)\*

We pulled rods, pump and tubing. Ran string of 2 3/8" tubing with R-4 Packer back in to 1750' and set packer. Treated with 1000 Gal. 15% HYD Acid with 1 Gal - HAF50. We displaced with 1250 Gal. w/ 2% KCL water. Swabbed the displaced water and acid out. Pulled tubing and packer. Ran 2 3/8" tubing pump and rods back in and put back on production. Job was completed on 3/24/82.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Dr. E. Seary TITLE Office Manager DATE 12-14-82

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DEC 16 1982

\*See Instructions on Reverse Side

BY ARK

NMOCC

DIV.  
DIST. 3

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse 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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐  
2. NAME OF OPERATOR BayStar Petroleum Corporation  
3. ADDRESS OF OPERATOR P.O. Box 2975 Corpus Christi, Tx 78403  
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface 660 fnl + 660 fel

5. LEASE DESIGNATION AND SERIAL NO.

14-20-603-50139

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo M

9. WELL NO.

M#9

10. FIELD AND POOL, OR WILDCAT

Many Rocks - Gallup

11. SEC. 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, OR BLK. AND SURVEY OR AREA

Sec 34 T32N R17W

14. PERMIT NO.

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

5,931' GR

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

12. COUNTY OR PARISH

San Juan N.M.

13. STATE

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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 pertinent to this work.)\*

Work performed on 8/20/85. Mixed 3 barrels water to one barrel turflow. Set pecker at 1730'. Pumped 4 barrels of chemical mixture in the hole. Filled remainder of tubing with water (approximately 3 barrels). Displaced chemical into formation with 4 barrels of water @ 1/4 BPM at 700PSI max pressure shut-in overnight. Swabbed well dry next day and put on pump 8/21/85.

Production before 1 BOPD 3 BWPD

Production After 1.5 BOPD 4 BWPD

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

SIGNED

Paul T. Tschala

TITLE

Geologist

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED DATE

9/16/85

DATE

9/16/85

\*See Instructions on Reverse Side

NMOC

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
**A.P.A. Development Corporation**

Address  
**P.O. Box 215, Cortez, Colorado 81321**

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name and address of previous owner **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "M"</b>	Well No. <b>9</b>	Pool Name, including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Navajo</b> State, Federal or Fee <b>14-20-603-5013</b>	Lease No.
Location				
Unit Letter <b>A</b>	<b>660</b>	Feet From The <b>North</b> Line and <b>660</b>	Feet From The <b>East</b>	
Line of Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>	NMPM, <b>San Juan</b>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Ciniza Pipe Line, Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1887, Bloomfield, NM 87413</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. is gas actually connected? When
	<b>C 34 32N 17W</b>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Patrick B Woolley*  
(Signature)  
*Operator*  
(Title)  
**10-12-88**  
(Date)

OIL CONSERVATION DIVISION

APPROVED **OCT 17 1988**, 19  
BY *Burt J. Shaw*  
TITLE **SUPERVISION DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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

5. Lease Designation and Serial No.

14206035013

6. If Indian, Allottee or Tribe Name

NAVAJO TRIGAL

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

APA Development INC

3. Address and Telephone No.

PO Box 1093 Shiprock NM 87420

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

NO 9 NAVAJO M 660 FNL + 660 FEL

Sec 34 L20N14-20 603 5013 T32N, R17W

8. Well Name and No.

NO 9 NAVAJO M

9. API Well No.

~~NO 9 NAVAJO M~~

10. Field and Pool, or Exploratory Area

MANY ROCKS

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  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion in 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.)

We Tested NO 9 NAVAJO Pumped BOT has started  
Rods will service & put into production  
within 90 days

RECEIVED  
N JUN - 3 1997

OIL CON. DIST.  
DIST. 3

97 JUN - 2 PM 3:01  
070 INFORMATION, NM

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

Signed William E. Spencer

Title Pres

Date 6-1-97

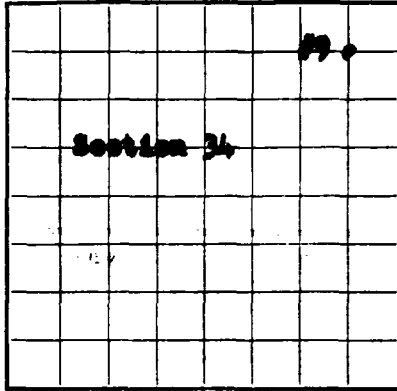
(This space for Federal or State office use)

Approved by /S/ Duane W. Spencer

Title

Date JUN - 4 1997

Conditions of approval, if any:



LOCATE WELL CORRECTLY

U. S. LAND OFFICE --- Window Rock  
SERIAL NUMBER --- 14-20-603-3013  
LEASE OR PERMIT TO PROSPECT ---  
Navajo "H"

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**ILLEGIBLE**  
**LOG OF OIL OR GAS WELL**

Company --- **Shelly Oil Company** --- Address --- **Box 38 - Hobbs, New Mexico** ---  
Lessor or Tract --- **Navajo "H"** --- Field --- **Horseshoe Gallup** State --- **New Mexico** ---  
Well No. --- **9** --- Sec. --- **34** T. --- **12-N** R. --- **17-W** Meridian --- **N.M.P.M.** --- County --- **San Juan** ---  
Location --- **460** ft. { **N** } of --- **E** Line and --- **460** ft. { **E** } of --- **E** Line of --- **Section 34** --- Elevation --- **9931** ---  
(Derick floor relative to datum)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

(ORIGINAL)  
Signed --- **H. E. Aub**

Date --- **MAY 28, 1963** ---Title --- **Dist. Supt.** ---

The summary on this page is for the condition of the well at above date.

Commenced drilling --- **April 24,** ---, 19**63** --- Finished drilling --- **April 27,** ---, 19**63** ---

**OIL OR GAS SANDS OR ZONES**

(Denote gas by G)

No. 1, from --- **1762'** --- to --- **1769'** --- No. 4, from --- to ---  
No. 2, from --- to --- No. 5, from --- to ---  
No. 3, from --- to --- No. 6, from --- to ---

**IMPORTANT WATER SANDS**

No. 1, from --- to --- No. 3, from --- to ---  
No. 2, from --- to --- No. 4, from --- to ---

**CASING RECORD**

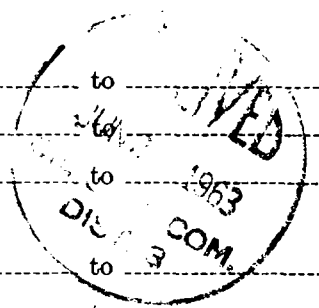
Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
8-5/8"	32	3	10	100	10	10	10	10	10
5"	24	3	10	100	10	10	10	10	10
3 1/2"	18	3	10	100	10	10	10	10	10
2 1/2"	14	3	10	100	10	10	10	10	10
2"	11	3	10	100	10	10	10	10	10
1 1/2"	8	3	10	100	10	10	10	10	10
1"	6	3	10	100	10	10	10	10	10
3/4"	4	3	10	100	10	10	10	10	10
1/2"	3	3	10	100	10	10	10	10	10
3/8"	2	3	10	100	10	10	10	10	10
1/4"	1	3	10	100	10	10	10	10	10

**MUDDING AND CEMENTING RECORD**

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
8-5/8"	24'	10	By Hand	---	---
5"	1802'	75	Pump & Plug	---	---
3 1/2"					
2 1/2"					
2"					
1 1/2"					
1"					
3/4"					
1/2"					
3/8"					
1/4"					

**PLUGS AND ADAPTERS**

Heaving plug—Material --- Length --- Depth set ---  
Adapters—Material --- Size ---



FOLD | MARK

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 5" OS casing perfor. 1762 - 1769' with 30,000 gallons of lease oil and 30,000 20/40 sand.						

#### TOOLS USED

Rotary tools were used from 0 feet to 1805 feet, and from feet to feet

Cable tools were used from feet to feet, and from feet to feet

#### DATES

19

Put to producing May 10, 1963

The production for the first 24 hours was 86 barrels of fluid of which 99.9% was oil; .1% emulsion; .% water; and .% sediment.

Gravity, °Bé. 41.3

If gas well, cu. ft. per 24 hours

Gallons gasoline per 1,000 cu. ft. of gas

Rock pressure, lbs. per sq. in.

#### EMPLOYEES

Johnston, Driller

Odum, Driller

#### FORMATION RECORD

FROM-	TO-	TOTAL FEET	FORMATION
0	320	320	Sandstone
320	1435	1115	Shale - Top Mancos 320'
1435	1621	186	Shale - Top Middle Gallup 1435'
1621	1762	141	Shale - Top Lower Gallup 1621'
1762	1778	16	Sand - Top Tecito Sandstone 1762'
1778	1805	27	Shale - Top Sanastee 1778'
	1805		Total Depth
	1792		Plug Back Total Depth
			Geological Tops by Schlumberger Induction Gamma Ray Log.

Core No. 1 - 1750' - 1769' - 6" (19' - 6") Recovered 19' - 6"

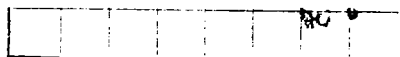
Top - 6' - 0" - Dark Gray Shale  
Next - 4' - 6" - Silty Gray Shale  
Next - 1' - 0" - Dark Shale and Shaley Sand  
Next - 1' - 0" - Interbedded Sand and Shale, Glauconitic with stain and odor  
Next - 7' - 0" - Sand, Glauconitic, oil saturated

ILLEGIBLE

FROM-	TO-	TOTAL FEET	FORMATION
-------	-----	------------	-----------

(OVER)  
FORMATION RECORD-Continued

16-43094-5



FORM 9-220

20-50-903-2013  
20-50-903-2013

PRINTED BY THE BUREAU OF LAND SURVEY

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-105  
Effective 1-1-65

DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	4
PRODUCTION OFFICE	

Operator

Getty Oil Company

Address

P. O. Box 3360, Casper, WY 82602

Reason(s) for filing (Check proper box)

New Well ☐ Change In Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change In Ownership ☒ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

Skelly Oil Company, Box 3360, Casper, WY 82602

1. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Nayajo "M"	9	Many Rocks Gallup	State, Federal or Fee	Fed 14-20-603-503
Location	Unit Letter	Feet From The	Line and	Feet From The
A	550	North	660	East
Line of Section	Township	Range	NMPM,	County
34	32N	17W	San Juan	

1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Shell Pipeline Corp.	Box 1588, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually collected?	When
	C	34	32N	17W		

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Restv.	Diff. Restv.
Date Started	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, R&B, 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					

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

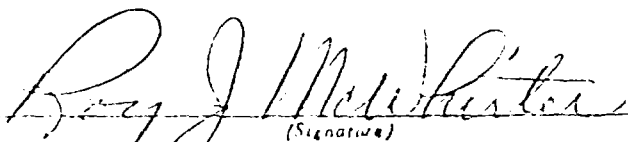
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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

1. CERTIFICATE OF COMPLIANCE

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



Area Superintendent

(Title)

2/9/77

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 15 1977, 19

ORIGINAL SIGNED BY H. E. MAXWELL, JR.

BY

For the Commission, Mr. H. E. Maxwell, Jr., NO. 3

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the casing or tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED		6
DISTRIBUTION		
SANTA FE		
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		3
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I.

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 9	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-603-5013
Location				
Unit Letter A ; 660 Feet From The North Line and 660 Feet From The East				
Line of Section 34 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Shell Pipeline Corp.	P.O. Box 1588, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Pge. 17W	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 Resv.	Diff. Resv.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Shousley  
(Signature)  
Co. operator  
(Title)  
Sept 11, 1979  
(Date)

OIL CONSERVATION COMMISSION

SEP 12 1979

APPROVED Original Signed by A. R. Kendrick

BY SUPERVISOR DISTRICT # 3

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-85

Operator WTR OIL COMPANY	
Address Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner \_\_\_\_\_

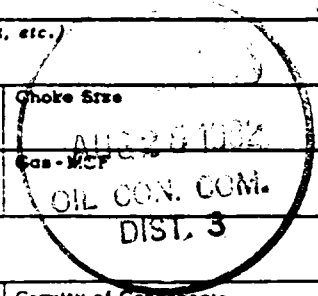
Lease Name Navajo "M"	Well No. 9	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal State, Federal or Fee 14-20-603	Lease No. 5013
Location				
Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u>				
Line of Section <u>34</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
Ciniza Pipe Line, Inc.		P.O. Box 1887, Bloomfield, New Mexico 87413		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)		
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W
		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'r.	Diff. Res'r.
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 Tanks	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/MMCF	Gravity of Condensate
Producing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION AUG 25 1982	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED _____, 19____	
_____ Office Manager		BY <u>Original Signed by FRANK T. CHAVEZ</u>	
8-24-82 (Date)		SUPERVISOR DISTRICT # 3	
		TITLE _____	
This form is to be filed in compliance with RULE 1104.			
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
All sections of this form must be filled out completely for allowables on new and recompleted wells.			
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.			
Separate Forms C-104 must be filed for each pool in multiple completion.			

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

Operator BayStar Petroleum Corporation	
Address P. O. Box 2975, Corpus Christi, Texas 78403	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 9	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-603-5013
Location Unit Letter A ; 660 Feet From The North Line and 660 Feet From The East				
Line of Section 34 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1887, Bloomfield, NM 87413	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34
	Twp. 32N	Rge. 17W
	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.
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 Tanks	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.	Gps-MCF

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 2, 1985  
(Date)

OIL CONSERVATION COMMISSION  
MAY 06 1985  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Frank J. [Signature]  
TITLE \_\_\_\_\_ SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply

OIL CONSERVATION DIVISION

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

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 A.P.A. Development Inc.		Well API No.
Address P.O. Box 215, Cortez, CO 81321		
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 checked="" 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 Navajo "M"	Well No. 9	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Nava   o State, Federal or Fee 14	Lease No. -20-603-5013
Location Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line Section 34 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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. MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	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.

Signature  
Patrick B. Woosley  
Printed Name  
Operator  
8/7/90  
Date  
(303) 565-2458  
Telephone No.

OIL CONSERVATION DIVISION

AUG 28 1990

Date Approved

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.

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 A.P.A. Development, Inc.		Well API No. 300451121000S1
Address P.O. Box 215, Cortez, CO 81321		
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"/>	<input checked="" 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 Navajo "M"	Well No. 9	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-603-5013
Location Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>34</u> Township <u>32N</u> Range <u>17W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary-Williams Energy Corporation	Address (Give address to which approved copy of this form is to be sent) 370 - 17th St., Ste 5300, Denver, CO 80202-5653	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34
	Twp. 32N	Rge. 17W
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
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.D.T.D.		
Elevations (D.F., R.R.B., R.I., G.R., 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 on a 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 DEC 1 4 1993
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF OIL CONSERV. DIV.

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

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.

Signature  
Patrick Woosley  
Printed Name  
12/6/93  
Date  
303-565-2458  
Title  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 1 4 1993  
By  
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.

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 *AAA Development*  
*% NMOCO*

3. Address and Telephone No.

*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

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

*34-32N-17W 2130/S2 510/E*

5. Lease Designation and Serial No.

*14-20-603-5013*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*10 Navajo M*

9. API Well No.

*30045 & 7061*

10. Field and Pool, or Exploratory Area

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 \_\_\_\_\_

- ☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOCO Contract Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_

Date *8/17/00*

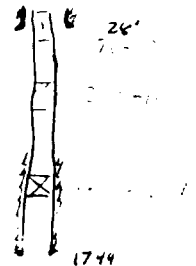
Conditions of approval, if any:

**API NUMBER** 30-045-87061  
**OPERATOR NAME** APA DEVELOPMENT CORP **WELL NUMBER** 10  
**PROPERTY NAME** NAVAJO M  
**SECTION 34** **TOWNSHIP 32N** **RANGE 17W**  
**FOOTAGE** 2130 FSL 510 FEL UL "I"

Sur Csg OD	12 1/4" HOLE	7 5/8	XX		XX
SUR CSG TD		28	XX		XX
SUR CSG WT		17.7	XX		XX
TOP OF CMT		0	XX		XX
ACTUAL			XX		XX
CACULATED		7 SX	XX		XX
PROD CSG OD	6 1/4	4 1/2	XX		XX
PROD CSG TD		1744	XX		XX
PROD CSG WT		9.5	XX		XX
TOP OF CMT		1337	XX		XX
FORMATION TOP	ACTUAL	EST			
GALLUP 1357	CACULATED	100SX			
MANCOS 230	PERF TOP	1688			
	PERF BOTTOM	1694	XX		XX
	PACKER		XX		XX
	TYPE OF PLUG		XX		XX
	CIBP & CMT		XX		XX
	CMT		XX		XX
			XX		XX

#### PROPOSED PLUGGING OPERATION

MIRU PU, TOOH W/RODS & TUBING, PICK UP WORK STRING, CIRC HOLE  
 SPOT 14 SX PLUG 1407-1257, WOC, TAG FILL AS REQUIRED  
 PERF @ 280' PUMP 32 SX, 280-180, 18 SX OUTSIDE CSG, 14 SX INSIDE CSG  
 PERF @ 78 CIRC CEMENT TO SURFACE, EST 10 SX  
 CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS,  
 Close pits according to guidelines: Clean and level location



(SUBMIT IN TRIPLICATE)

Indian Agency Window Rock

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Allottee Navajo

Lease No. 14-20-603-5013


Well No. 10

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

July 22, 1963

Navajo "M"  
Well No. 10 is located 2130 ft. from [S] line and 510 ft. from [E] line of sec. 34

SE/4 Sec. 34 (1/4 Sec. and Sec. No.) 32N 17W NMPH  
(Twp.) (Range) (Meridian)  
Undesignated Gallup San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5846 ft. (est.)

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 10 to around 1750' to test Gallup formation.

Our casing program is as follows:

- 20' - 7-5/8"OD 17.7# Spiral Weld Casing - to be cemented with 10 sacks regular cement.
- 1750' - 4-1/2"OD 9.5# J-55 Casing - to be cemented with 75 sacks regular cement w/6% gel and 25# gilsonite per sack and 25 sacks regular w/2% calcium chloride.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY

Address Box 730

Hobbs, New Mexico

By

J. M. George  
Title Assistant District Superintendent

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**Well Location and Acreage Dedication Plat**

**SECTION A.**

Date July 22, 1963

Operator Skelly Oil Company Lease Navajo "M"  
Well No. 10 Unit Letter I Section 34 Township 32 North Range 17 West NMPM  
Located 2130 Feet From South Line, 510 Feet From East Line  
County San Juan G. L. Elevation 5846 Dedicated Acreage 40 Acres  
Name of Producing Formation Gallup Pool Undesignated Gallup

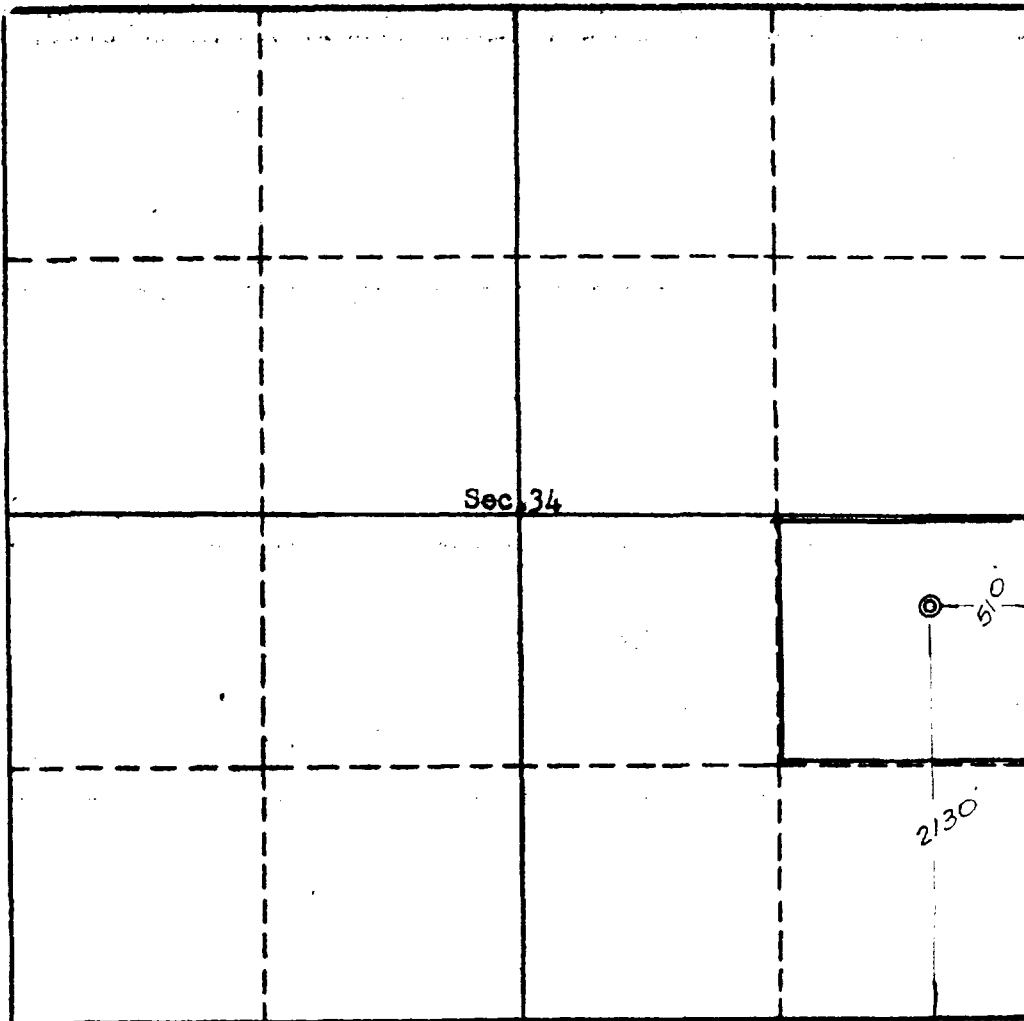
1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_. If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION



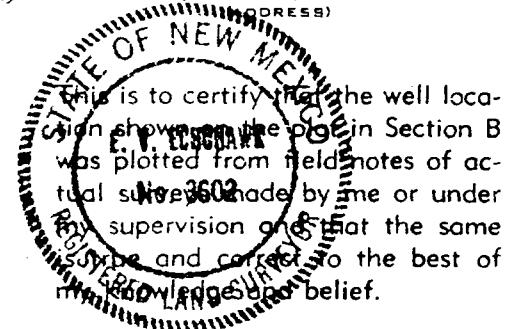
**SECTION B.**



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

Skelly Oil Company  
(OPERATOR)

J. M. George  
(REPRESENTATIVE)  
Box 730, Hobbs, New Mexico  
(ADDRESS)

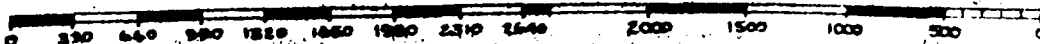


Date Surveyed July 20, 1963

**Four States Engineering Co.**  
FARMINGTON, NEW MEXICO

Carl V. Eckschawk  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602





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	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**

(Rev. 7-60)

*Be*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Savage "W"</b>		Well No. <b>20</b>	
Unit Letter <b>I</b>	Section <b>24</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Many Buckle Gulch</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>6</b>	Section <b>24</b>	Township <b>32N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1546, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

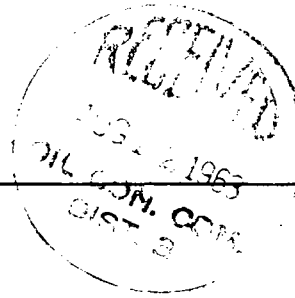
**Gas vented - waiting for gas connection**

**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

- New Well ..... ☒ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 9 day of August, 19 63.

OIL CONSERVATION COMMISSION		By <i>J. W. George</i>
Approved by <b>Original Signed Emery C. Arnold</b>	Title <b>Assistant District Superintendent</b>	Company <b>Shelly Oil Company</b>
Title <b>Supervisor Dist. # 3</b>	Address <b>Box 730, Hobbs, New Mexico</b>	
Date <b>Aug 14 1963</b>		

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TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

REQUEST FOR (OIL) - ~~ALLOWABLE~~ ALLOWABLE

**ILLEGIBLE**

New Well

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico

(Place)

8-9-63

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company

(Company or Operator)

Navajo "M"

(Lease)

Well No. 10, in NE  $\frac{1}{4}$  SE  $\frac{1}{4}$ ,

I  
Unit Letter

Sec. 34

T. 32N

R. 17W

NMPM, Many Rocks Gallup

Pool

San Juan

County. Date Spudded 7-23-63

Date Drilling Completed 7-25-63

Please indicate location:

Elevation 5846'

Total Depth 1750'

PBTD

1739'

Top Oil/Gas Pay 1688'

Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1688-1694'

Open Hole ---

Depth

Casing Shoe 1744'

Depth

Tubing 1676'

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls. water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 91 bbls. oil, \_\_\_\_\_ bbls. water in 24 hrs, 0 min. Size \_\_\_\_\_

GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

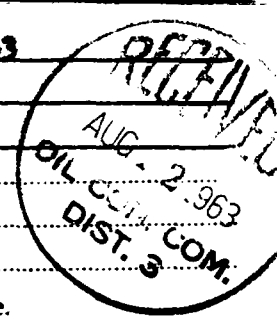
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated w/ 34,902 gals. lease oil and 20,000# 20-40 sand.

Casing Press. \_\_\_\_\_ Tubing Press. \_\_\_\_\_ Date first new oil run to tanks August 5, 1963

Oil Transporter El Paso Products Pipeline Company

Gas Transporter \_\_\_\_\_

Remarks: Well pumped 91 bbls. oil in 24 hours.



I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved Aug 12 1963, 19

OIL CONSERVATION COMMISSION

By: Emery C. Arnold

Title Superior Dist # 3

SKELLY OIL COMPANY

(Company or Operator)

By: J. W. George

(Signature)

Title Assistant District Superintendent

Send Communications regarding well to:

Name Skelly Oil Company

Address Box 730, Hobbs, New Mexico

DEVIATION AFFIDAVIT

Date August 9, 1963

New Mexico Oil Conservation Commission  
1000 Rio Graces Road  
Astec, New Mexico  
STATE OF New Mexico  
COUNTY OF San Juan

ILLEGIBLE

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of July 1963, Scott Bros. Drilling Co. ran the following surveys for Skelly Oil Company on their Navajo "H" lease, Well No. 10, in NE 1/4 of SE 1/4 of Section 14-12N-17W NMPM, Mary Rocks Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
500'	1.0		
1000'	1.5		
1500'	1.75		

Subscribed and sworn to before me this 9 day of August 19 63

Billie J. Russell  
Notary Public in and for said County and State

My Commission expires: 9/1-1966

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

J. W. George  
Name  
Assistant District Superintendent  
Position

Box 730, Hobbs, New Mexico  
Address



(SUBMIT IN TRIPLICATE)

Indian Agency Window Rock


UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Allottee Navajo  
Lease No. 14-22-403-203

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL.....	SUBSEQUENT REPORT OF WATER SHUT-OFF.....	<b>XX</b>
NOTICE OF INTENTION TO CHANGE PLANS.....	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.....	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.....	SUBSEQUENT REPORT OF ALTERING CASING.....	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL.....	SUBSEQUENT REPORT OF REDRILLING OR REPAIR.....	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE.....	SUBSEQUENT REPORT OF ABANDONMENT.....	
NOTICE OF INTENTION TO PULL OR ALTER CASING.....	SUPPLEMENTARY WELL HISTORY.....	
NOTICE OF INTENTION TO ABANDON WELL.....	<u>Perforating &amp; Treating</u>	<b>XX</b>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

August 27, 19 63

Navajo "M"  
Well No. 10 is located 2130 ft. from XXXX line and 510 ft. from E line of sec. 34  
NE/4 Sec. 34 34N 17W N.M.P.M.  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Mary Becks Collins San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5046 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate building, casing points, and all other important proposed work)  
Well spudded July 22, 1963. Set 7-5/8" OD casing at 25' and cemented with 7 sacks by hand. W.O.C. 24 hrs. Drilled to 1679'.

COKE NO. 1 - 1679 - 1699' (20') - Recovered 20'

Top - 9' - Black shale

Next - 2' - Shale sand

Next - 4' - Gray sand, oil saturated

Next - 1' - Shale sand with horizontal fractures, oil saturated

Next - 4' - Shale with line streaks

Reached total depth of 1790' on July 26, 1963. Set 4-1/2" OD casing at 1744' and cemented with 100 sacks. W.O.C. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1729', P.B.T.D. 1729'. Perforated 4-1/2" OD casing from 1688-1694' for a total of 6' and 24 holes. Treated through 4-1/2" OD casing perfs. 1688-1694' with 24,962 gals. lease oil & 30,000# 20/40 sand & 6-7/8" ball sealers. (see reverse side)

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 720

Hotchkiss, New Mexico

By (ORIGINAL) H. E. Asb

Title Dist. Supt.

ILLEGIBLE

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
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FILE	
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LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "H"</b>		Well No. <b>10</b>	
Unit Letter <b>"T"</b>	Section <b>24</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>"G"</b>	Section <b>24</b>	Township <b>32-N</b>	Range <b>17-W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 1588 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>  <b>None</b>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Waiting on gas connection - Gas being vented.**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☒ Dry Gas ..... ☐  
 Casing head gas ..... ☐ Condensate... ☐

Change in Ownership ..... ☐  
 Other (explain below)

**TRANSPORTER CHANGED FROM SHELL  
 OIL COMPANY TO SHELL PIPE LINE  
 CORPORATION EFFECTIVE 12/31/63**

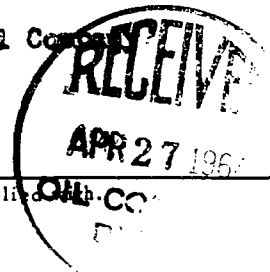
Remarks

**Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **24th** day of **April**, 19 **64**.

OIL CONSERVATION COMMISSION		By
Approved by	Original Signed Emery C. Arnold	<i>Charles J. Love</i>
Title		<b>Dist. Engineer</b>
Date	<b>Supervisor Dist # 3</b>	Company <b>Skelly Oil Company</b>
	<b>APR 27 1964</b>	Address <b>Box 730 - Hobbs, New Mexico</b>



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to open or plug a well in a different reservoir. Use Form 9-331-C for such proposals.)

1. oil well ☒ gas well ☐ other ☐

2. NAME OF OPERATOR  
WTR OIL COMPANY

3. ADDRESS OF OPERATOR  
Drawer LL, Cortez, Colo. 81321

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 510' FEL-2130' FSL Sec 32, T32N, R17W.  
AT SURFACE:  
AT TOP PROD. INTERVAL: 1688'  
AT TOTAL DEPTH: 1710'

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☒  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐

RECEIVED

JAN 20 1982

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

5. LEASE

14-20-603-5013

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo M

9. WELL NO.

#10

10. FIELD OR WILDCAT NAME

Many Rocks - Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 510' FEL - 2130' FSL of Sec. 34, T32N, R17W, NMPM

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5846 DF

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 pertinent to this work.)\*

We propose to clean sediment and scale out of the casing six feet below the perfs which are at 1688' - 1694', then treat perfs with 1,000 gal. of Halliburton 15% acid through 2 3/8' tubing with a packer set at approximately 1680'. We will then swab out the spent acid and put well back on production. We propose to start this work the week of 1-18-82. Soon as we get approval.

Verbal approval was given on 1-18-82 by telephone from Mr. John Keller to Lee Searcy of WTR Oil Co.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Lee Searcy TITLE Office Manager DATE 1-15-82

APPROVED BY JAMES F. SIMS TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL \_\_\_\_\_

APPROVED

JAN 21 1982  
for JAMES F. SIMS  
DISTRICT ENGINEER

\*See Instructions on Reverse Side

NMOCC

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐

2. NAME OF OPERATOR  
WTR Oil Company

3. ADDRESS OF OPERATOR  
Drawer LL, Cortez, Colo 81321

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.) 510' FEL-2130' FSL Sec 34-T32N-R17W  
AT SURFACE:  
AT TOP PROD. INTERVAL: 1688'  
AT TOTAL DEPTH: 1710'

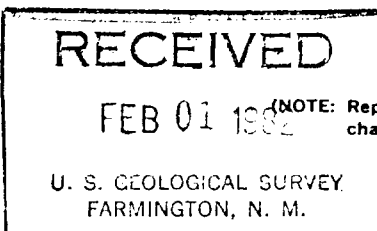
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

SUBSEQUENT REPORT OF:

☐  
☐  
☒  
☐  
☐  
☐  
☐  
☐



5. LEASE  
14-20-603-5013

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Navajo Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Navajo M

9. WELL NO.  
# 10

10. FIELD OR WILDCAT NAME  
Many Rocks - Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 510' FEL-2130' FSL of Sec. 34-T32N-R17W-NMPM

12. COUNTY OR PARISH San Juan 13. STATE New Mexico

14. API NO.

15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5846 DF

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 pertinent to this work.)\*

We have completed the acid job. We acidized through 2 3/8 UP Tubing with a R-4 Packer set at 1670', using 1,000 Gal. of Halliburton 15% Acid. We flushed with 10 BBLS water and let set until acid was spent, we swabbed to retrieve the spent acid. We put the well back on production on 1-22-82.

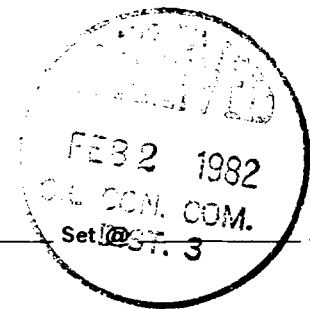
Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED Lee E. Seasey TITLE Office Manager DATE 1-25-82

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE ACCEPTED FOR RECORD  
CONDITIONS OF APPROVAL, IF ANY:



\*See Instructions on Reverse Side

NMOCC

FEB 01 1982  
FARMINGTON DISTRICT  
BY 143

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(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 depth.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED

SEP 20 1985

5. LEASE DESIGNATION AND SERIAL NO.

1420-603-5031  
6. INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo M

9. WELL NO.

M#10

10. FIELD AND POOL, OR WILDCAT

Many Rocks - Gallup

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

Sec 34 T32N R17W

12. COUNTY OR PARISH

San Juan

13. STATE

N.M.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Baystar Petroleum Corporation

3. ADDRESS OF OPERATOR

P.O. Box 2975 Corpus Christ, Texas 78463

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

See also space 17 below.)

At surface

510' fel + 2130' Fsl

14. PERMIT NO.

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

5,846' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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 pertinent to this work.)\*

Work performed on 8/27/85. Mixed 3 barrels water with 1 barrel Turflow. Set packer at 1640'. Swabbed well dry. Pumped down 4 barrels chemical mixture and filled remainder of tubing with water. Displaced chemical into formation with 4 barrels of water at 1/4 BPM. Shut-in over night and swabbed dry on 8/28/85. Pump well back on 8/28/85.

Production Before: 1.5 BOPD 2.5 BWPD

Production After: 1 BOPD 4 BWPD

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

SIGNED

*Frank H. Hulse*

TITLE

Geologist

DATE

9/16/85

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

DATE

SEP 30 1985

FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

NMOCC



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator <b>A.P.A. Development Corporation</b>	
Address <b>P.O. Box 215, Cortez, Colorado 81321</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "M"</b>	Well No. <b>10</b>	Pool Name, including Formation <b>Mary Rocks Gallup</b>	Kind of Lease <b>Navajo</b>	Lease No. <b>14-20-603-5013</b>
Location Unit Letter <b>I</b> : <b>2130</b> Feet From The <b>South</b> Line and <b>510</b> Feet From The <b>East</b> Line of Section <b>34</b> Township <b>32N</b> Range <b>17W</b> NMPM. <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Ciniza Pipe Line, Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1887, Bloomfield, NM 87413</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<b>C 34 32N 17W</b>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Patrick B. Woolley*  
(Signature)  
*Operator*  
(Title)  
*10-12-88*  
(Date)

OIL CONSERVATION DIVISION

OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY *[Signature]*  
TITLE **SUPERVISION DISTRICT #3**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

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

MAY 20 AM 10:30  
070 FARMINGTON, NM

3. Lease Designation and Serial No.  
14-20-603-501

6. If Indian, Allottee or Tribe Name

30-045-11168

SUBMIT IN TRIPLICATE

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

7. If Unit or CA, Agreement Designation

NAVAJO TRIBAL

2. Name of Operator  
APA Development Inc

8. Well Name and No.  
10 NAVAJO M

3. Address and Telephone No.  
PO Box 1093 Ship Rock NM 87426

9. API Well No.

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

2130/S 510/E I-34-32N-17W

10. Field and Pool, or Exploratory Area

MANY ROCKS

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 \_\_\_\_\_
- ☐ 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.)

This WELL NAVAJO M-10 This well returned to production May 15, 1997 currently producing 10 Barrels of oil + water per day

RECEIVED  
MAY 20 1997

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

Signed William E. Brown Title Pres Date 5-20-97

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any: ACCEPTED

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

NMOCD

FARMINGTON DISTRICT OFFICE

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

5. Lease Designation and Serial No.

14266035013

6. If Indian, Allottee or Tribe Name

NAVAJO TRIBAL

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

APA Development INC

3. Address and Telephone No.

P.O. Box 1083 Shiprock N Mex 8740

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

NO 10 NAVAJO M 2130 E SL & 510 FFL  
Sec 34 - Lease 1426603 5013  
T. 34 - T32N, R17W

8. Well Name and No.

NO 10 NAVAJO M

9. API Well No.

11168  
30045 87065

10. Field and Pool, or Exploratory Area

MANY ROCKS

11. County or Parish, State

SAN JUAN N Mex

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

☐ Change of Plans

☐ New Construction

☐ Non-Routine Fracturing

☐ Water Shut-Off

☐ Conversion to Injection

☐ Dispose Water

(Note: Report results of multiple completion or 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.)

THIS WELL NO 10 WAS PUT ON PUMP MAY 05  
SHIPPING OIL IN JUNE NOW IN PRODUCTION

RECEIVED  
JUN - 5 1997

OIL CON. DIV.  
DIST. 3

070 FARMINGTON, NM

97 JUN - 2 PM 3:01

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

Signed William E. Bore Title Pres

Date 6-1-97

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

ACCEPTED FOR RECORD

JUN 01 1997

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

QV

Smm

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

A PA Development

3. Address and Telephone No.

PO Box 1093 Shiprock NM 87420

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

No 10 Navajo P 1980 FSL & 660 FWL  
Sec 26-lease 1420-60-3540-32N17W San Juan NM

5. Lease Designation and Serial No.

1420 600 3540

6. If Indian, Allottee or Tribe Name

Navajo Tribal

7. If Unit or CA, Agreement Designation

8. Well Name and No.

No 10 Navajo P

9. API Well No.

3004587061

10. Field and Pool, or Exploratory Area

Monk Rock

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  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

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.)\*

No 10 Navajo P well - in process of changing  
To Elec. Needs 2600 ft of Heda cable trying  
to locate New Cable - Motor & Transformers now  
in place need apt 30 days more

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

Signed William E. Gow Title Officer

Date 6-26-97

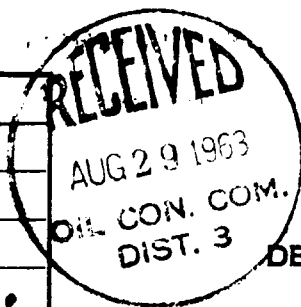
(This space for Federal or State office use)

Approved by /s/ Doug W. Spencer  
Conditions of approval, if any:

Title

Date JUN 30 1997


LOCATE WELL CORRECTLY


 U. S. LAND OFFICE Window Rock  
 SERIAL NUMBER 14-20-603-5013  
 LEASE OR PERMIT TO PROSPECT \_\_\_\_\_

 UNITED STATES  
 DEPARTMENT OF THE INTERIOR  
 GEOLOGICAL SURVEY

 RECEIVED  
 AUG 29 1963

## LOG OF OIL OR GAS WELL

 Company Shelly Oil Company Address Box 730 - Hobbs, New Mexico  
 Lessor or Tract Navajo "N" Field Many Rocks Gallup State New Mexico  
 Well No. 10 Sec. 34 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
 Location 2130 ft. N of 8 Line and 510 ft. W of 8 Line of Section 34 Elevation 5846  
 (Derrick floor relative to sea level)

 The information given herewith is a complete and correct record of the well and all work done thereon  
 so far as can be determined from all available records.

Signed

(ORIGINAL) M. E. AabDate August 27, 1963Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

 Commenced drilling July 23, 1963 Finished drilling July 26, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

 No. 1, from 1689' to 1694' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

 No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
7-5/8"	17.5	3	Steel	100	Plug	1689'	1694'		Isolation
4-1/2"	17.5	3	Steel	100	Plug	1694'	1694'		Isolation

## HISTORY OF OIL OR GAS WELL

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8"	20'	7	By Hand	---	---
4-1/2"	17 1/2'	100	Pump & Plug	---	---

ILLEGIBLE

5. Reaving plug—Material ..... Length ..... Depth set .....  
Adapters—Material ..... Size .....

### SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" OD pipe. 1683' - 1694' with 34,982 gallons of lease oil, 30,000# 20/40 sand and 6 - 7/8" ball sealers.						

### TOOLS USED

Rotary tools were used from ..... feet to ..... feet, and from ..... feet to ..... feet  
Cable tools were used from ..... feet to ..... feet, and from ..... feet to ..... feet

### DATES

....., 19..... Put to producing ..... August 5, ..... 1943  
The production for the first 24 hours was ..... barrels of fluid of which 99.9% was oil; .....%  
emulsion; .....% water; and .1% sediment. Gravity, °Bé. 41.2  
If gas well, cu. ft. per 24 hours ..... Gallons gasoline per 1,000 cu. ft. of gas .....  
Rock pressure, lbs. per sq. in. ....

### EMPLOYEES

..... Johnston, Driller ..... Driller  
..... Eden, Driller ..... Driller

### FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	230	230	Sand & Shale
230	1357	1127	Sand & Shale - Top Manassas - 230'
1357	1548	191	Sand & Shale - Top Middle Gallup - 1357'
1548	1688	140	Sand & Shale - Top Lower Gallup - 1548'
1688	1705	17	Sand & Shale - Top Totito - 1688'
1705	1750	45	Sand & Shale - Top Senassee - 1705'
	1750	Total Depth	
	1729	Plug Back Total Depth	

Geological Tops Picked by Schlumberger  
Induction Gamma Ray Log.

CORE NO. 1 - 1679' - 1699' - (20') - Recovered 20'

Top - 0' - Black shale  
Next - 2' - Shaley sand  
Next - 4' - Gray sand, oil saturated  
Next - 1' - Shaley sand with horizontal fractures, oil saturated  
Next - 4' - Shale with lime streaks

ILLEGIBLE

FROM—	TO—	TOTAL FEET	FORMATION
-------	-----	------------	-----------

(OVER)

FORMATION RECORD—Continued

16-48094-5

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator Getty Oil Company	
Address P. O. Box 3360, Casper, WY 82602	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 10	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-603-5031
Location				
Unit Letter 1	2130	Feet From The South	Line and 510	Feet From The East
Line of Section 34	Township 32N	Range 17W	NMFM, San Juan	County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp	Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, NM 87401				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	Is gas actually connected? When

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

V. 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	F.B.T.D.					
Elevations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							

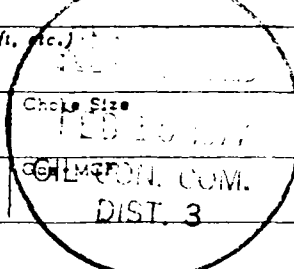
TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 Tanks	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-MMCF/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

CERTIFICATE OF COMPLIANCE

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

Area Superintendent  
(Title)

2/4/77

(Date)

OIL CONSERVATION COMMISSION

FEB 15 1977

APPROVED \_\_\_\_\_, 19\_\_

BY ORIGINAL SIGNED BY N. E. MAXWELL, JR.

PETROLEUM ENGINEER NO. 51  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED		6
DISTRIBUTION		
SANTA FE		1
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		3
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I.

Operator	
WTR Oil Company	
Address	
P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Federal	Lease No.
Navajo "M"	10	Many Rocks Gallup	State, Federal or Fee	14-20-603	5013
Location					
Unit Letter	I	2130 Feet From The	South	Line and	510 Feet From The
Line of Section	34	Township	32N	Range	17W
				NMPM,	San Juan
				County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Shell Pipeline Corporation	P.O. Box 1588, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.	Is gas actually connected?	When
	C	34	32N	17W		

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Keesley  
(Signature)  
co. operator  
(Title)  
Sept 11, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19\_\_\_\_  
BY Original Signed by A. R. Kendrick  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.



DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

Operator WTR OIL COMPANY		
Address Drawer LL, Cortez, Colorado 81321		
Reason(s) for filing (Check proper box)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
Other (Please explain)		

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 10	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal State, Federal or Fee 14-20-603	Lease No. 5013
Location				
Unit Letter I : 2130 Feet From The South Line and 510 Feet From The East				
Line of Section 34 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, New Mexico 87413				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, CR, 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 Tanks	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/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Lee E. Lacey  
(Signature)  
Office Manager  
8-24-82  
(Date)

OIL CONSERVATION COMMISSION  
AUG 25 1982  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by FRANK T. CHAVEZ  
SUPERVISOR DISTRICT # 3  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
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Separate Forms C-104 must be filed for each pool in multiple.

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator BayStar Petroleum Corporation	
Address P. O. Box 2975, Corpus Christi, Texas 78403	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 10	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-603-5013
Location				
Unit Letter I ; 2130 Feet From The South Line and 510 Feet From The East				
Line of Section 34 Township 32N Range 17W, N10PM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Ciniza Pipe Line, Inc.	P. O. Box 1887, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 2, 1985  
(Date)

OIL CONSERVATION COMMISSION	
MAY 06 1985	
APPROVED	BY
SUPERVISOR DISTRICT # 3	
TITLE	
This form is to be filed in compliance with RULE 1104.	
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
All sections of this form must be filled out completely for allowable on new and recompleted wells.	
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.	
Separate Forms C-104 must be filed for each pool in multiply	

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

I.

Operator A.P.A. Development Inc.	Well API No.
Address P.O. Box 215, Cortez, CO 81321	
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 checked="" 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 Navajo "M"	Well No. 10	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Navajo State, Federal or Fee 14-20-603-5013
Location Unit Letter I : 2130 Feet From The South Line and 510 Feet From The East Line Section 34 Township 32N Range 17W, NMPM, San Juan County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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/MCF	Gravity of Condensate
Testing Method (prior, 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.

Signature  
Patrick B. Woosley  
Printed Name  
Patrick B. Woosley  
Date  
8/7/90  
Telephone No.  
(303) 565-2458

Operator

Title

OIL CONSERVATION DIVISION

AUG 28 1990

Date Approved

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.

# OIL CONSERVATION DIVISION

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

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 A.P.A. Development, Inc.		Well API No. 300458706500S1
Address P.O. Box 215, Cortez, CO 81321		
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"/>	<input checked="" 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 Navajo "M"	Well No. 10	Pool Name, including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-603-5013
Location Unit Letter <u>I</u> : <u>2130</u> Feet From The <u>South</u> Line and <u>510</u> Feet From The <u>East</u> Line Section <u>34</u> Township <u>32N</u> Range <u>17W</u> , NMPM, San Juan County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary-Williams Energy Corporation	Address (Give address to which approved copy of this form is to be sent) 370 - 17th St., Ste 5300, Denver, CO 80202-5653	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34
	Twp. 32N	Rge. 17W
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
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 DEC 14 1993
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	GAS - MCF OIL CON. DIV. DIST. 3

### 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

### 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.

Signature Patrick Woosley  
Printed Name Patrick Woosley  
Date 12/6/93 Title 303-565-2458  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved DEC 14 1993

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.



APA Development  
NAVA JO M 11  
G-34-32N 17W.  
1720N 1750E  
45-11202

**API NUMBER** 30-045-11202  
**OPERATOR NAME** APA DEVELOPMENT CORP **WELL NUMBER** 11  
**PROPERTY NAME** NAVAJO M  
**SECTION 34** **TOWNSHIP 32N** **RANGE 17W**  
**FOOTAGE** 1720 FNL 1750 FEL UL "G"

	Sur Csg OD	12 1/4" HOLE	7 5/8	XX			XX
	SUR CSG TD		34	XX			XX
	SUR CSG WT		17.7	XX			XX
	TOP OF CMT		0	XX			XX
	ACTUAL			XX			XX
	CACULATED		12SX	XX			XX
	PROD CSG OD	6 1/4	4 1/2	XX			XX
	PROD CSG TD		1742	XX			XX
	PROD CSG WT		9.5	XX			XX
	TOP OF CMT		941	XX			XX
FORMATION TOP	ACTUAL		EST	XX		XX	
GALLUP 1381	CACULATED		100SX	XX		XX	
MANCOS 290	PERF TOP		1707	XX		XX	
	PERF BOTTOM		1715	XX		XX	
	PACKER			XX		XX	
	TYPE OF PLUG			XX		XX	
	CIBP & CMT			XX		XX	
	CMT			XX		XX	

#### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOO H W/RODS & TUBING, PICK UP WORK STRING, CIRC HOLE  
 SPOT 14 SX PLUG 1431-1281, WOC TAG, FILL AS REQUIRED  
 PERF AT 340' PMP 32 SX PLUG, 340-240, 18 SX OUTSIDE CSG, 14 SX INSIDE CSG  
 PERF @ 84' CIRC CEMENT TO SURFACE, EST 20 SX  
 CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS,  
**Close pits according to guidelines: Clean and level location**





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

5. Lease Designation and Serial No.  
**14-20-603-5013**

6. If Indian, Allottee or Tribe Name

**Navajo Tribe**

7. If Unit or CA, Agreement Designation

8. Well Name and No.

**11 Navajo M**

9. API Well No.

**3004511202**

10. Field and Pool, or Exploratory Area

11. County or Parish, State

**San Juan, NM**

**SUBMIT IN TRIPLICATE**

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator **APA Development**

**% NMOCO**

3. Address and Telephone No.

**1000 Rio Brazos Rd. Aztec NM 87410 334-6178**

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

**34-32N-17W 1720/N-1750/E**

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

- ☐ 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.)

**See attached plugging procedure.**

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

Signed **NMOCO CONTRACT Plugging**

Date **8/11/00**

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_

Date **8/17/00**


(SUBMIT IN TRIPLICATE)

UNITED STATES

DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Budget Bureau No. 43-838  
Approval expires 12-31-62  
Indian Agency

Alottee  
Lease No.

## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY
NOTICE OF INTENTION TO ABANDON WELL	

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

October 18,

Navajo 11  
Well No. 11 is located 1750 ft. from N line and 1750 ft. from E line of sec. 34  
N 1/4 Sec. 34  
(1/4 Sec. and Sec. No.)  
Hobbs Wells Gallup (Town) San Juan (Range) New Mexico (Meridian)  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5887 ft. (cont. KB)

### DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 11 to around 1775' to test Gallup formation.

Our casing program is as follows:

- 20' - 7-5/8" OD 17.75 Spiral Weld Casing - to be cemented with 10 sacks regular cement.
- 1775' - 4-1/2" OD 9.50 J-55 Casing - to be cemented with 75 sacks regular cement w/66 gal and 25% gilsonite per sack and 25 sacks regular w/75 calcium chloride.

ILLEGIBLE

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company **SKELLY OIL COMPANY**

Address **Box 730**

**Hobbs, New Mexico**

By *J. W. George*  
Assistant District Superintendent



NEW MEXICO OIL CONSERVATION COMMISSION  
Well Location and Acreage Dedication Plat

SECTION A

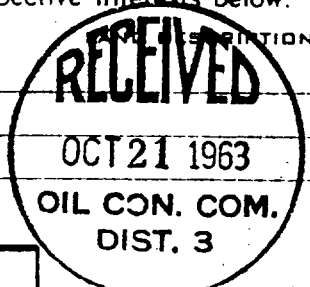
Date October 18, 1963

Operator Skelly Oil Company Lease Navajo "X"  
Well No. 31 Unit Letter 31 Section 34 Township 32 North Range 17 West  
Located 1750 Feet From North Line 1750 Feet From East  
County McKinley G. Elevation 5021 Dedicated Acreage 40 Acres  
Name of Producing Formation Gallup Pool Many Rocks Gallup

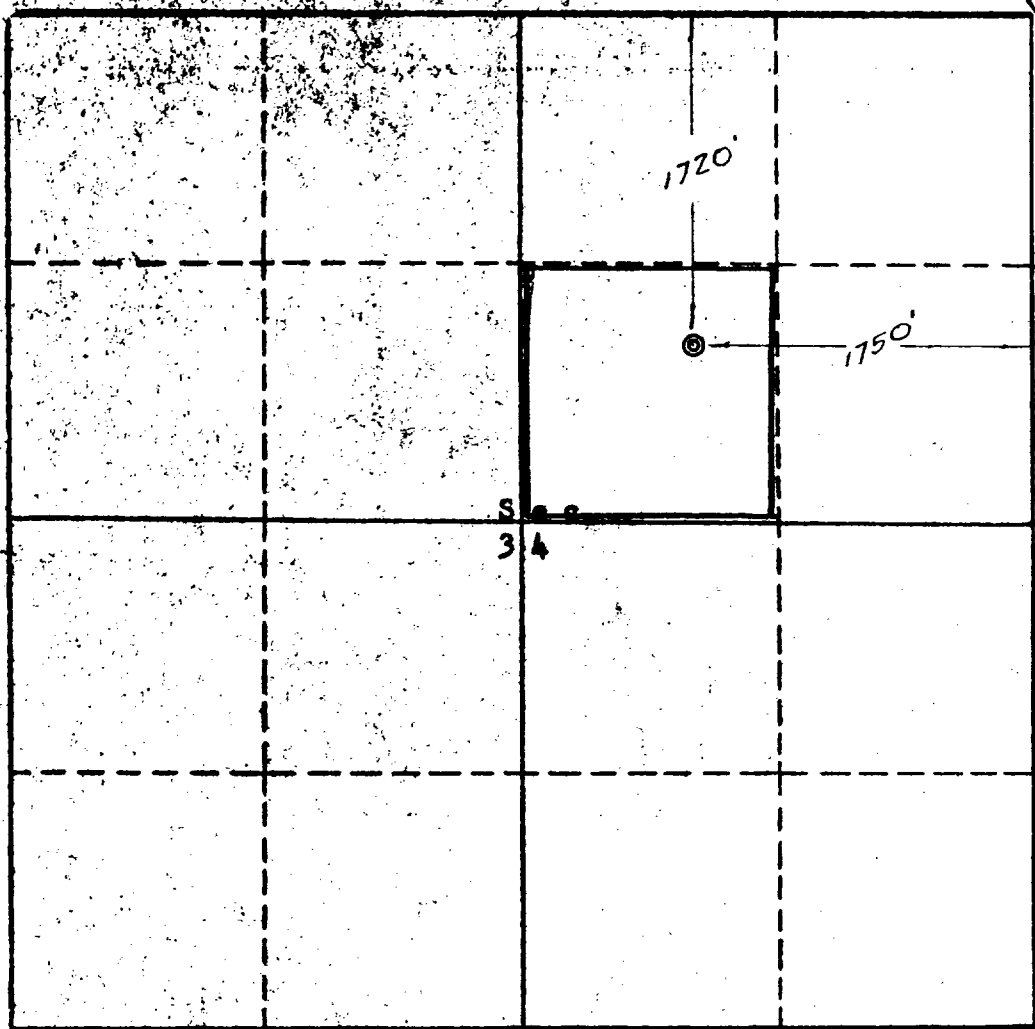
1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? Yes X No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_ If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

ILLEGIBLE



SECTION B



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY  
(OPERATOR)

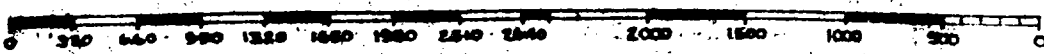
J. W. George  
(REPRESENTATIVE)  
Box 730, Hobbs, New Mexico  
(ADDRESS)

This is to certify that the well location shown on the plat in Section B was plotted from 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 Oct. 15, 1963  
Four States Engineering Co.  
FARMINGTON, NEW MEXICO

Ernest V. Eckshank  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TWO COPIES TO THE GEOLOGICAL SURVEY

DATE: 08-10-63

Form approved Budget Bureau No. 42-R1424  
LEASE DESIGNATION AND SERIAL NO.

14-22-403-0013  
OF INDIAN, COUNTRY 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

Shelly Oil Company

3. ADDRESS OF OPERATOR

Box 730 - Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See the space below for details.)

1720' FEL & 1730' FEL of Section 34 - 32N - 17W

14. PREVIOUS NO.

9893' BF

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

NATURE OF INTENTION IS

SUBSEQUENT REPORT OF:

TEST WATER SHUT OFF

WATER SHUT OFF

WATER SHUT OFF

REPAIRING WELL

FEATHER TREAT

WATER TREAT

FEATHER TREATMENT

ALTERING CASING

SHUT OFF PLUG

SHUT OFF

SHUT OFF PLUG

ABANDONMENT

REPAIR WELL

REPAIR WELL

REPAIR

OTHER

(Note: For results of multiple completion on Well, use separate section Report and log form.)

17. DESCRIBE PROPOSED WORK (If work is done, include a summary of work done, including estimated date of starting any proposed work. If work is done, include a summary of work done, including estimated date of starting any proposed work. If work is done, include a summary of work done, including estimated date of starting any proposed work.)

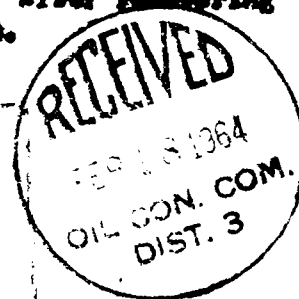
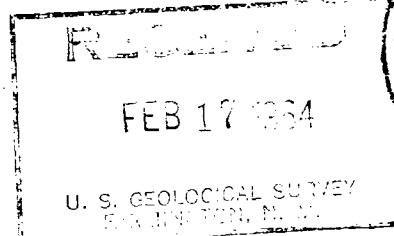
Well spudded November 12, 1963. Set 7-5/8" OD casing at 34' and cemented with 12 sacks by hand. W.O.C. 24 hours. Drilled to 1697'.

CORE NO. 1 - 1697' - 1717' - Recovered 18' 6"

Top 7' - 6" - Sandy shale  
Next 6' - 6" - Dark gray sand - oil saturated  
Next 4' - 6" - Shale with lime streaks - NS

Reached total depth of 1732' on November 15, 1963. Set 4-1/2" OD casing at 1732' and cemented with 100 sacks. W.O.C. 24 hours. Shut off tested OK. Did not drill out cement plug at 1737'. RSTD 1737'. Perforated 4-1/2" OD casing from 1707' - 1715' for a total of 8' and 32 holes. Treated through 4-1/2" OD casing perfor. 1707' - 1715' with 43,200 gallons lease oil and 40,000 20/40 sand. After recovering all lease oil well, pumped 300 barrels of oil and no water in 24 hours.

ILLEGIBLE



18. Thereby certify that the foregoing is true and correct

SIGNED

DATE

Sgt. Capt.

DATE

December 23, 1963

(This space for Federal or State Office use)

APPROVED BY

TITLE

DATE

CONTINUATIONS OF APPROVAL (If any)

\*See Instructions on Reverse Side

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TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - ~~ALLOWABLE~~ ILLEGIBLE

New Well  
~~RECOMPLETION~~

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico

12-9-63

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company Navajo "M", Well No. 11, in. 3 1/4 NE 1/4,  
(Company or Operator) (Lease)

G, Sec. 34, T. 32N, R. 17W, NMPM., Many Backs Gallup Pool  
Unit Letter

San Juan

County. Date Spudded 11-12-63 Date Drilling Completed 11-15-63

Elevation 5894' KB Total Depth 1752' PBD 1737'

Top Oil/Gas Pay 1707' Name of Prod. Form. Gallup

### PRODUCING INTERVAL -

Perforations 1707-1715'

Open Hole — Depth — Casing Shoe 1747' Depth Tubing 1624'

### OIL WELL TEST -

Natural Prod. Test: — bbls. oil, — bbls water in — hrs, — min. Size — Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 300 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size — Choke

### GAS WELL TEST -

Natural Prod. Test: — MCF/Day; Hours flowed — Choke Size —

Method of Testing (pitot, back pressure, etc.): —

Test After Acid or Fracture Treatment: — MCF/Day; Hours flowed —

Choke Size — Method of Testing: —

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated with 43,200 gal. lease crude & 40,000# 20-40 sand.

Casing Press. — Tubing Press. — Date first new oil run to tanks November 29, 1963

Oil Transporter El Paso Products Pipeline Company

Gas Transporter —

Remarks: Well pumped 300 barrels in 24 hours

I hereby certify that the information given above is true and complete to the best of my knowledge.  
Approved DEC 12 1963, 19—

OIL CONSERVATION COMMISSION

Original Signed By  
By: A. R. KENDRICK  
Title PETROLEUM ENGINEER DIST NO. 3

**RECEIVED**  
**DEC 12 1963**  
**CON. COM.**  
**DIST. 3**  
By: J. M. Gutz  
(Signature)  
Title Assistant District Superintendent  
Send Communications regarding well to:  
Name Skelly Oil Company  
Address Box 730, Hobbs, New Mexico

1720' PBL & 1750' PBL  
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Size
<u>7-5/8"</u>	<u>34'</u>	<u>12</u>
<u>4-1/2"</u>	<u>1747'</u>	<u>100</u>
<u>2-3/8"</u>	<u>1624'</u>	<u>—</u>

DEVIATION AFFIDAVIT

Date December 9, 1963

New Mexico Oil Conservation Commission

1000 Rio Brazos Road

Astec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

ILLEGIBLE

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of May, 1963, S. S. Rosmas Well Serv. ran the following surveys for Skelly Oil Company on their Navajo "H" lease, Well No. 11, in SW 1/4 of NE 1/4 of Section 34-32N-17W NMPN, Mary Becka Collins Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
<u>450'</u>	<u>1</u>		
<u>978'</u>	<u>1/2</u>		
<u>1489'</u>	<u>1/4</u>		

Subscribed and sworn to before me this 9 day of December 19 63

James W. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

Name J. W. George

Assistant District Superintendent  
Position

Box 730, Hobbs, New Mexico  
Address



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	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo "B"</b>		Well No. <b>11</b>	
Unit Letter <b>6</b>	Section <b>24</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Many Arches Gelling</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>6</b>	Section <b>24</b>	Township <b>32N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1540 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented waiting for gas connection**

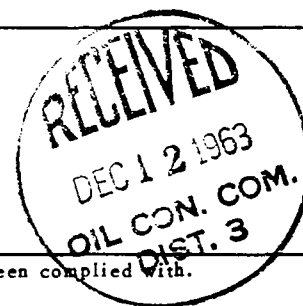
**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒  
 Change in Transporter (check one)  
   Oil ..... ☐ Dry Gas ..... ☐  
   Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 9 day of December, 19 63.

**OIL CONSERVATION COMMISSION**

Approved by  
 Original Signed By  
**A. R. KENDRICK**

Title  
**PETROLEUM ENGINEER DIST. NO. 3**

Date  
**DEC 12 1963**

By  
  
 Title  
**Assistant District Superintendent**  
 Company  
**Shelly Oil Company**  
 Address  
**Box 730, Hobbs, New Mexico**

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. TYPE OF WELL

**11**

2. TYPE OF COMPLETION

**1**

3. NAME OF WELL

**Shell Oil Company**

4. ADDRESS

**Box 730 - Hobbs, New Mexico**

5. LOCATION OF WELL

**1720' TBL & 1730' TBL of Section 34 - 12N - 17E**

6. DATE OF COMPLETION

11-22-63 (11)

Navajo

Navajo "N"

Navajo "N"

11

RECEIVED

FEB 17 1964

RECEIVED

FEB 18 1964

OIL CON. COM.  
DIST. 3

**San Juan**

**Section 34 - 12N - 17E**

11-12-63

11-13-63

11-29-63

1963

7. TOTAL DEPTH, W. A. T.

**1732'**

**1737'**

8. DEPTH OF INTERVAL

**1707 - 1725'**

**0 - 1732'**

ILLEGIBLE

9. TYPE OF LOG

**Loss Wells Gamma Ray Irradiation Log - none well working**

10. CASING SIZE

**7-5/8"**  
**4-1/2"**

**17.75**  
**9.55**

**34'**  
**1722'**

**12-1/4"**  
**6-3/4"**

**12 seats**  
**100 seats**

11

SIZE

TOP. MID.

**1000**

**2**

**1622'**

12. PERFORATION RECORD

**1707' - 1715' - For a total of 8' and 12 shots.**

**1707 - 1725'**

**Treated down 4-1/2" CB casing with 43,200 gals. of lease oil & 40,000# 20/40 sand & 16-7/8" ball valves**

13

DATE FIRST TEST

**11 - 29 - 63**

**Leasing - 2" - 6 sup. common traveling valve**

**Producing**

DATE OF LOG

**11 - 29 - 63**

**24hrs.**

**700**

**100%**

**0**

FLOW TESTED DURING

**41.6°**

14. DISPOSITION OF WELL

**100%**

**Mr. J. H. George**

**Dist. Dept.**

**December 23, 1963**

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	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*B.T.*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Havaje "K"</b>		Well No. <b>11</b>	
Unit Letter <b>WGN</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>WGN</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>				Address (give address to which approved copy of this form is to be sent) <b>Box 1588 - Farmington, New Mexico</b>			
<b>Shell Oil Company</b>							
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			
<b>None</b>							

If gas is not being sold, give reasons and also explain its present disposition:

**Waiting on gas connection - Gas being vented.**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☒ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

**TRANSPORTER CHANGED FROM SHELL  
 OIL COMPANY TO SHELL PIPE LINE  
 CORPORATION EFFECTIVE 12/31/69**

**Remarks**

**Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company**

**RECEIVED**  
**APR 27 1964**  
**OIL CO.**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 24th day of April, 19 64.

OIL CONSERVATION COMMISSION		By <i>Charles J. Love</i>
Approved by <b>Original Signed Emory C. Arnold</b>		Title <b>Dist. Engineer</b>
Title <b>Supervisor Dist. # 3</b>		Company <b>Skelly Oil Company</b>
Date <b>APR 27 1964</b>		Address <b>Box 730 - Hobbs, New Mexico</b>

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.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

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

14. PERMIT NO.

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

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

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

12. COUNTY OR PARISH 13. STATE

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

Work was performed on 7/24/85. Backside was filled  
up with 10 barrels of H<sub>2</sub>O. Packer held. Mixed 165  
gallons with H<sub>2</sub>O with one barrel of Tur Flow. Pumped  
chemical in and filled up tubing with water. Increased  
up to 900 psi and displaced chemical with 388 gallons  
of water. Well was shut in over night and swabed  
dry the following day. Well was set back on production  
7/25/85. Production before treatment: 1 BOPD 33 BWPD  
Production after treatment: 2 BOPD 40 BWPD

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

SIGNED Ronald F. Hatcher

TITLE Geologist

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE AUG 16 1985

FARMINGTON RESOURCE AREA

BY SMN

\*See Instructions on Reverse Side

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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**RECEIVED**  
OCT 17 1988  
OIL CONSERVATION DIVISION

I. Operator  
**A.P.A. Development Corporation**

Address  
**P.O. Box 215, Cortez, Colorado 81321**

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership			

Other (Please explain)

If change of ownership give name and address of previous owner **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "M"</b>	Well No. <b>11</b>	Pool Name, including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Navajo</b>	Lease No. <b>14-20-603-5013</b>
Location				
Unit Letter <b>G</b>	<b>1720</b>	Feet From The <b>North</b>	Line and <b>1750</b>	Feet From The <b>East</b>
Line of Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>	NMPM. <b>San Juan</b>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Ciniza Pipe Line, Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1887, Bloomfield, NM 87413</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<b>C 34 32N 17W</b>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

**Patrick B. Worsley**  
(Signature)  
**Operator**  
(Title)  
**10-12-88**  
(Date)

OIL CONSERVATION DIVISION

OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY **Barry D. Shum**  
TITLE **SUPERVISION DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

# INSTRUCTIONS

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 26, below regarding separate reports for separate completions. If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All statements should be listed on this form, see item 36.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 18:** Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments, items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

**Item 29: "Sacks Cement":** Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

**Item 33:** Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

## 37. SUMMARY OF POROUS ZONES SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS, AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
Zone 1 - 6' - 1477' - 1487' (20') - Estimated 14' - 6'			
Zone 2 - 6' - 1487' - 1497' (10') - Estimated 10' - 6'			
Zone 3 - 6' - 1497' - 1507' (10') - Estimated 10' - 6'			
Zone 4 - 6' - 1507' - 1517' (10') - Estimated 10' - 6'			
Zone 5 - 6' - 1517' - 1527' (10') - Estimated 10' - 6'			
Zone 6 - 6' - 1527' - 1537' (10') - Estimated 10' - 6'			
Zone 7 - 6' - 1537' - 1547' (10') - Estimated 10' - 6'			
Zone 8 - 6' - 1547' - 1557' (10') - Estimated 10' - 6'			
Zone 9 - 6' - 1557' - 1567' (10') - Estimated 10' - 6'			
Zone 10 - 6' - 1567' - 1577' (10') - Estimated 10' - 6'			
Zone 11 - 6' - 1577' - 1587' (10') - Estimated 10' - 6'			
Zone 12 - 6' - 1587' - 1597' (10') - Estimated 10' - 6'			
Zone 13 - 6' - 1597' - 1607' (10') - Estimated 10' - 6'			
Zone 14 - 6' - 1607' - 1617' (10') - Estimated 10' - 6'			
Zone 15 - 6' - 1617' - 1627' (10') - Estimated 10' - 6'			
Zone 16 - 6' - 1627' - 1637' (10') - Estimated 10' - 6'			
Zone 17 - 6' - 1637' - 1647' (10') - Estimated 10' - 6'			
Zone 18 - 6' - 1647' - 1657' (10') - Estimated 10' - 6'			
Zone 19 - 6' - 1657' - 1667' (10') - Estimated 10' - 6'			
Zone 20 - 6' - 1667' - 1677' (10') - Estimated 10' - 6'			
Zone 21 - 6' - 1677' - 1687' (10') - Estimated 10' - 6'			
Zone 22 - 6' - 1687' - 1697' (10') - Estimated 10' - 6'			
Zone 23 - 6' - 1697' - 1707' (10') - Estimated 10' - 6'			
Zone 24 - 6' - 1707' - 1717' (10') - Estimated 10' - 6'			
Zone 25 - 6' - 1717' - 1727' (10') - Estimated 10' - 6'			
Zone 26 - 6' - 1727' - 1737' (10') - Estimated 10' - 6'			
Zone 27 - 6' - 1737' - 1747' (10') - Estimated 10' - 6'			
Zone 28 - 6' - 1747' - 1757' (10') - Estimated 10' - 6'			
Zone 29 - 6' - 1757' - 1767' (10') - Estimated 10' - 6'			
Zone 30 - 6' - 1767' - 1777' (10') - Estimated 10' - 6'			
Zone 31 - 6' - 1777' - 1787' (10') - Estimated 10' - 6'			
Zone 32 - 6' - 1787' - 1797' (10') - Estimated 10' - 6'			
Zone 33 - 6' - 1797' - 1807' (10') - Estimated 10' - 6'			
Zone 34 - 6' - 1807' - 1817' (10') - Estimated 10' - 6'			
Zone 35 - 6' - 1817' - 1827' (10') - Estimated 10' - 6'			
Zone 36 - 6' - 1827' - 1837' (10') - Estimated 10' - 6'			
Zone 37 - 6' - 1837' - 1847' (10') - Estimated 10' - 6'			
Zone 38 - 6' - 1847' - 1857' (10') - Estimated 10' - 6'			
Zone 39 - 6' - 1857' - 1867' (10') - Estimated 10' - 6'			
Zone 40 - 6' - 1867' - 1877' (10') - Estimated 10' - 6'			
Zone 41 - 6' - 1877' - 1887' (10') - Estimated 10' - 6'			
Zone 42 - 6' - 1887' - 1897' (10') - Estimated 10' - 6'			
Zone 43 - 6' - 1897' - 1907' (10') - Estimated 10' - 6'			
Zone 44 - 6' - 1907' - 1917' (10') - Estimated 10' - 6'			
Zone 45 - 6' - 1917' - 1927' (10') - Estimated 10' - 6'			
Zone 46 - 6' - 1927' - 1937' (10') - Estimated 10' - 6'			
Zone 47 - 6' - 1937' - 1947' (10') - Estimated 10' - 6'			
Zone 48 - 6' - 1947' - 1957' (10') - Estimated 10' - 6'			
Zone 49 - 6' - 1957' - 1967' (10') - Estimated 10' - 6'			
Zone 50 - 6' - 1967' - 1977' (10') - Estimated 10' - 6'			
Zone 51 - 6' - 1977' - 1987' (10') - Estimated 10' - 6'			
Zone 52 - 6' - 1987' - 1997' (10') - Estimated 10' - 6'			
Zone 53 - 6' - 1997' - 2007' (10') - Estimated 10' - 6'			
Zone 54 - 6' - 2007' - 2017' (10') - Estimated 10' - 6'			
Zone 55 - 6' - 2017' - 2027' (10') - Estimated 10' - 6'			
Zone 56 - 6' - 2027' - 2037' (10') - Estimated 10' - 6'			
Zone 57 - 6' - 2037' - 2047' (10') - Estimated 10' - 6'			
Zone 58 - 6' - 2047' - 2057' (10') - Estimated 10' - 6'			
Zone 59 - 6' - 2057' - 2067' (10') - Estimated 10' - 6'			
Zone 60 - 6' - 2067' - 2077' (10') - Estimated 10' - 6'			
Zone 61 - 6' - 2077' - 2087' (10') - Estimated 10' - 6'			
Zone 62 - 6' - 2087' - 2097' (10') - Estimated 10' - 6'			
Zone 63 - 6' - 2097' - 2107' (10') - Estimated 10' - 6'			
Zone 64 - 6' - 2107' - 2117' (10') - Estimated 10' - 6'			
Zone 65 - 6' - 2117' - 2127' (10') - Estimated 10' - 6'			
Zone 66 - 6' - 2127' - 2137' (10') - Estimated 10' - 6'			
Zone 67 - 6' - 2137' - 2147' (10') - Estimated 10' - 6'			
Zone 68 - 6' - 2147' - 2157' (10') - Estimated 10' - 6'			
Zone 69 - 6' - 2157' - 2167' (10') - Estimated 10' - 6'			
Zone 70 - 6' - 2167' - 2177' (10') - Estimated 10' - 6'			
Zone 71 - 6' - 2177' - 2187' (10') - Estimated 10' - 6'			
Zone 72 - 6' - 2187' - 2197' (10') - Estimated 10' - 6'			
Zone 73 - 6' - 2197' - 2207' (10') - Estimated 10' - 6'			
Zone 74 - 6' - 2207' - 2217' (10') - Estimated 10' - 6'			
Zone 75 - 6' - 2217' - 2227' (10') - Estimated 10' - 6'			
Zone 76 - 6' - 2227' - 2237' (10') - Estimated 10' - 6'			
Zone 77 - 6' - 2237' - 2247' (10') - Estimated 10' - 6'			
Zone 78 - 6' - 2247' - 2257' (10') - Estimated 10' - 6'			
Zone 79 - 6' - 2257' - 2267' (10') - Estimated 10' - 6'			
Zone 80 - 6' - 2267' - 2277' (10') - Estimated 10' - 6'			
Zone 81 - 6' - 2277' - 2287' (10') - Estimated 10' - 6'			
Zone 82 - 6' - 2287' - 2297' (10') - Estimated 10' - 6'			
Zone 83 - 6' - 2297' - 2307' (10') - Estimated 10' - 6'			
Zone 84 - 6' - 2307' - 2317' (10') - Estimated 10' - 6'			
Zone 85 - 6' - 2317' - 2327' (10') - Estimated 10' - 6'			
Zone 86 - 6' - 2327' - 2337' (10') - Estimated 10' - 6'			
Zone 87 - 6' - 2337' - 2347' (10') - Estimated 10' - 6'			
Zone 88 - 6' - 2347' - 2357' (10') - Estimated 10' - 6'			
Zone 89 - 6' - 2357' - 2367' (10') - Estimated 10' - 6'			
Zone 90 - 6' - 2367' - 2377' (10') - Estimated 10' - 6'			
Zone 91 - 6' - 2377' - 2387' (10') - Estimated 10' - 6'			
Zone 92 - 6' - 2387' - 2397' (10') - Estimated 10' - 6'			
Zone 93 - 6' - 2397' - 2407' (10') - Estimated 10' - 6'			
Zone 94 - 6' - 2407' - 2417' (10') - Estimated 10' - 6'			
Zone 95 - 6' - 2417' - 2427' (10') - Estimated 10' - 6'			
Zone 96 - 6' - 2427' - 2437' (10') - Estimated 10' - 6'			
Zone 97 - 6' - 2437' - 2447' (10') - Estimated 10' - 6'			
Zone 98 - 6' - 2447' - 2457' (10') - Estimated 10' - 6'			
Zone 99 - 6' - 2457' - 2467' (10') - Estimated 10' - 6'			
Zone 100 - 6' - 2467' - 2477' (10') - Estimated 10' - 6'			
Zone 101 - 6' - 2477' - 2487' (10') - Estimated 10' - 6'			
Zone 102 - 6' - 2487' - 2497' (10') - Estimated 10' - 6'			
Zone 103 - 6' - 2497' - 2507' (10') - Estimated 10' - 6'			
Zone 104 - 6' - 2507' - 2517' (10') - Estimated 10' - 6'			
Zone 105 - 6' - 2517' - 2527' (10') - Estimated 10' - 6'			
Zone 106 - 6' - 2527' - 2537' (10') - Estimated 10' - 6'			
Zone 107 - 6' - 2537' - 2547' (10') - Estimated 10' - 6'			
Zone 108 - 6' - 2547' - 2557' (10') - Estimated 10' - 6'			
Zone 109 - 6' - 2557' - 2567' (10') - Estimated 10' - 6'			
Zone 110 - 6' - 2567' - 2577' (10') - Estimated 10' - 6'			
Zone 111 - 6' - 2577' - 2587' (10') - Estimated 10' - 6'			
Zone 112 - 6' - 2587' - 2597' (10') - Estimated 10' - 6'			
Zone 113 - 6' - 2597' - 2607' (10') - Estimated 10' - 6'			
Zone 114 - 6' - 2607' - 2617' (10') - Estimated 10' - 6'			
Zone 115 - 6' - 2617' - 2627' (10') - Estimated 10' - 6'			
Zone 116 - 6' - 2627' - 2637' (10') - Estimated 10' - 6'			
Zone 117 - 6' - 2637' - 2647' (10') - Estimated 10' - 6'			
Zone 118 - 6' - 2647' - 2657' (10') - Estimated 10' - 6'			
Zone 119 - 6' - 2657' - 2667' (10') - Estimated 10' - 6'			
Zone 120 - 6' - 2667' - 2677' (10') - Estimated 10' - 6'			
Zone 121 - 6' - 2677' - 2687' (10') - Estimated 10' - 6'			
Zone 122 - 6' - 2687' - 2697' (10') - Estimated 10' - 6'			
Zone 123 - 6' - 2697' - 2707' (10') - Estimated 10' - 6'			
Zone 124 - 6' - 2707' - 2717' (10') - Estimated 10' - 6'			
Zone 125 - 6' - 2717' - 2727' (10') - Estimated 10' - 6'			
Zone 126 - 6' - 2727' - 2737' (10') - Estimated 10' - 6'			
Zone 127 - 6' - 2737' - 2747' (10') - Estimated 10' - 6'			
Zone 128 - 6' - 2747' - 2757' (10') - Estimated 10' - 6'			
Zone 129 - 6' - 2757' - 2767' (10') - Estimated 10' - 6'			
Zone 130 - 6' - 2767' - 2777' (10') - Estimated 10' - 6'			
Zone 131 - 6' - 2777' - 2787' (10') - Estimated 10' - 6'			
Zone 132 - 6' - 2787' - 2797' (10') - Estimated 10' - 6'			
Zone 133 - 6' - 2797' - 2807' (10') - Estimated 10' - 6'			
Zone 134 - 6' - 2807' - 2817' (10') - Estimated 10' - 6'			
Zone 135 - 6' - 2817' - 2827' (10') - Estimated 10' - 6'			
Zone 136 - 6' - 2827' - 2837' (10') - Estimated 10' - 6'			
Zone 137 - 6' - 2837' - 2847' (10') - Estimated 10' - 6'			
Zone 138 - 6' - 2847' - 2857' (10') - Estimated 10' - 6'			
Zone 139 - 6' - 2857' - 2867' (10') - Estimated 10' - 6'			
Zone 140 - 6' - 2867' - 2877' (10') - Estimated 10' - 6'			
Zone 141 - 6' - 2877' - 2887' (10') - Estimated 10' - 6'			
Zone 142 - 6' - 2887' - 2897' (10') - Estimated 10' - 6'			
Zone 143 - 6' - 2897' - 2907' (10') - Estimated 10' - 6'			
Zone 144 - 6' - 2907' - 2917' (10') - Estimated 10' - 6'			
Zone 145 - 6' - 2917' - 2927' (10') - Estimated 10' - 6'			
Zone 146 - 6' - 2927' - 2937' (10') - Estimated 10' - 6'			
Zone 147 - 6' - 2937' - 2947' (10') - Estimated 10' - 6'			
Zone 148 - 6' - 2947' - 2957' (10') - Estimated 10' - 6'			
Zone 149 - 6' - 2957' - 2967' (10') - Estimated 10' - 6'			
Zone 150 - 6' - 2967' - 2977' (10') - Estimated 10' - 6'			
Zone 151 - 6' - 2977' - 2987' (10') - Estimated 10' - 6'			
Zone 152 - 6' - 2987' - 2997' (10') - Estimated 10' - 6'			
Zone 153 - 6' - 2997' - 3007' (10') - Estimated 10' - 6'			
Zone 154 - 6' - 3007' - 3017' (10') - Estimated 10' - 6'			
Zone 155 - 6' - 3017' - 3027' (10') - Estimated 10' - 6'			
Zone 156 - 6' - 3027' - 3037' (10') - Estimated 10' - 6'			
Zone 157 - 6' - 3037' - 3047' (10') - Estimated 10' - 6'			
Zone 158 - 6' - 3047' - 3057' (10') - Estimated 10' - 6'			
Zone 159 - 6' - 3057' - 3067' (10') - Estimated 10' - 6'			
Zone 160 - 6' - 3067' - 3077' (10') - Estimated 10' - 6'			
Zone 161 - 6' - 3077' - 3087' (10') - Estimated 10' - 6'			
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Zone 170 - 6' - 3167' - 3177' (10') - Estimated 10' - 6'			
Zone 171 - 6' - 3177' - 3187' (10') - Estimated 10' - 6'			
Zone 172 - 6' - 3187' - 3197' (10') - Estimated 10' - 6'			
Zone 173 - 6' - 3197' - 3207' (10') - Estimated 10' - 6'			
Zone 174 - 6' - 3207' - 3217' (10') - Estimated 10' - 6'			
Zone 175 - 6' - 3217' - 3227' (10') - Estimated 10' - 6'			
Zone 176 - 6' - 3227' - 3237' (10') - Estimated 10' - 6'			
Zone 177 - 6' - 3237' - 3247' (10') - Estimated 10' - 6'			
Zone 178 - 6' - 3247' - 3257' (10') - Estimated 10' - 6'			
Zone 179 - 6' - 3257' - 3267' (10') - Estimated 10' - 6'			
Zone 180 - 6' - 3267' - 3277' (10') - Estimated 10' - 6'			
Zone 181 - 6' - 3277' - 3287' (10') - Estimated 10' - 6'			
Zone 182 - 6' - 3287' - 3297' (10') - Estimated 10' - 6'			
Zone 183 - 6' - 3297' - 3307' (10') - Estimated 10' - 6'			
Zone 184 - 6' - 3307' - 3317' (10') - Estimated 10' - 6'			
Zone 185 - 6' - 3317' - 3327' (10') - Estimated 10' - 6'			
Zone 186 - 6' - 3327' - 3337' (10') - Estimated 10' - 6'			
Zone 187 - 6' - 3337' - 3347' (10') - Estimated 10' - 6'			
Zone 188 - 6' - 3347' - 3357' (10') - Estimated 10' - 6'			
Zone 189 - 6' - 3357' - 3367' (10') - Estimated 10' - 6'			
Zone 190 - 6' - 3367' - 3377' (10') - Estimated 10' - 6'			
Zone 191 - 6' - 3377' - 3387' (10') - Estimated 10' - 6'			
Zone 192 - 6' - 3387' - 3397' (10') - Estimated 10' - 6'			
Zone 193 - 6' - 3397' - 3407' (10') - Estimated 10' - 6'			
Zone 194 - 6' - 3407' - 3417' (10') - Estimated 10' - 6'			
Zone 195 - 6' - 3417' - 3427' (10') - Estimated 10' - 6'			
Zone 196 - 6' - 3427' - 3437' (10') - Estimated 10' - 6'			
Zone 197 - 6' - 3437' - 3447' (10') - Estimated 10' - 6'			
Zone 198 - 6' - 3447' - 3457' (10') - Estimated 10' - 6'			
Zone 199 - 6' - 3457' - 3467' (10') - Estimated 10' - 6'			

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

A.P.A. Development, Inc.

3. Address and Telephone No.

P.O. Box 215 Cortez, CO 81321

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

1720' FNL 1750' FEL Sec 34 T32N R17W

5. Lease Designation and Serial No.

14-20-603-5013

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

8. Well Name and No.

M-11

9. API Well No.

3004511202

10. Field and Pool, or Exploratory Area

Many Rocks Gully

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

- ☐ 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.)

Plan to Plug well as follows:

1. Equalize cement plug from 1725' to 1525'
2. Pick up to 1524' circulate inhibited fluid to 100'
3. Circulate Cement from 100' to Surface.
4. Weld on dry hole marker, clean and remediate location.

RECEIVED  
AUG 2 3 1995

OIL CON. DIV.

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

Signed Peter E. Woolley

DIST. 3

Title Asst. A.P.A. Development

Date 8-16-95

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

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

NMOCD

APPROVED

AUG 21 1995

DISTRICT MANAGER

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

APA Development INC

3. Address and Telephone No.

Post Box 1093 Shiprock NM 87460

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

11 NAUASO M - 1726 FNL + 1756 F&L  
Sec 34 Lease 1426 603 5013

5. Lease Designation and Serial No.

1426 603-5013

6. If Indian, Allottee or Tribe Name

NAUASO TRGAL

7. If Unit or CA, Agreement Designation

8. Well Name and No.

11 NAUASO M 1

9. API Well No.

3004511202

10. Field and Pool, or Exploratory Area

MANY ROCKS

11. County or Parish, State

San Juan N Mex

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  
☐ 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.)

11 NAUASO M - WILL Be put on production within 90 days - Must be secured by Pulling well

RECEIVED  
JUN - 6 1997

OIL CON. DIV.  
DIST. 3

070 INFORMATION, NM  
97 JUN - 2 PM 3:00

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

Signed William C. Lopez Title Pres

Date 6-1-87

(This space for Federal or State office use)

Approved by Shawn Spa Title Team lead

Date 6/4/97

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 Instruction on Reverse Side

NMCCO

NO. OF COPIES RECEIVED		7
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		4
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-105  
Effective 1-1-65

Operator Getty Oil Company	
Address P. O. Box 3360, Casper, WY 82602	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner Skelly Oil Company, Box 3360, Casper, WY 82602	

II. DESCRIPTION OF WELL AND LEASE

Lessee Name Navajo "M"	Well No. 11	Pool Name, Including Formation Many Rocks Callup	Kind of Lease Federal	Lease No. 14-20-603-5031
Location				
Unit Letter G	: 1720	Feet From The North	Line and 1750	Feet From The East
Line of Section 34	Township 32N	Range 17W	, NMFM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp	Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, NM 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34
	Twp. 32N	Rge. 17W
Is gas actually connected?	When	

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

V. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'y.	Diff. Rest'y.
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					

VI. 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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



Area Superintendent

(Title)

2/4/77

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 15 1977, 19

BY ORIGINAL SIGNED BY N. E. MAXWELL, JR.

TITLE PATROLING

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1
	GAS
OPERATOR	3
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 11	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-603-13
Location				
Unit Letter G	1720	Feet From The North	Line and 1750	Feet From The East
Line of Section 34	Township 32N	Range 17W	, NMPM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <del>Shell Pipeline Corporation</del>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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 - Bbls.

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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

James P. Harsley  
(Signature)  
co. operator  
(Title)  
Sept 11, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979  
BY Original Signed by A. R. Kendrick  
SUPERVISOR DISTRICT # 3

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.

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Separate Forms C-104 must be filed for each pool in multiply completed wells.

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR OIL COMPANY	
Address Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "M"	Well No. 11	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-603-5013
Location				
Unit Letter <u>G</u> ; <u>1720</u> Feet From The <u>North</u> Line and <u>1750</u> Feet From The <u>East</u>				
Line of Section <u>34</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, New Mexico 87413			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W
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.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, CR, 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Lee E. Scurry  
(Signature)

Office Manager

8-24-82  
(Date)

OIL CONSERVATION COMMISSION

AUG 25 1982

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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Separate Forms C-104 must be filed for each pool or display

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	BayStar Petroleum Corporation		
Address	P. O. Box 2975, Corpus Christi, Texas 78403		
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.				
Navajo "M"	11	Many Rocks Gallup	Federal	14-20-603-5013				
Location								
Unit Letter	G	1720 Feet From The North	Line and	1750 Feet From The East				
Line of Section	34	Township	32N	Range	17W	NMPM,	San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Ciniza Pipe Line, Inc.	P. O. Box 1887, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	34	32N	17W		

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 2, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 06 1985  
BY Frank J. [Signature]  
SUPERVISOR DISTRICT # 3  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
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Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply



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 A.P.A. Development Inc.		Well API No.
Address P.O. Box 215, Cortez, CO 81321		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>	
Recompletion <input type="checkbox"/>	Oil <input checked="" 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 Navajo "M"	Well No. 11	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Navajo State, Federal or Fee 14	Lease No. 20-603-5013
Location Unit Letter <u>G</u> : <u>1720</u> Feet From The <u>North</u> Line and <u>1750</u> Feet From The <u>East</u> Line Section <u>34</u> Township <u>32N</u> Range <u>17W</u> , NMPM, San Juan County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
		Gas - MCF

**GAS WELL**

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	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.

Patrick B. Woosley  
Signature  
Patrick B. Woosley Operator  
Printed Name Title  
8/7/90 (303) 565-2458  
Date Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved AUG 28 1990

By Burt J. Shum  
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.

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 A.P.A. Development, Inc.		Well API No. 300451120200S1
Address P.O. Box 215, Cortez, CO 81321		
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"/>	<input checked="" 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 Navajo "M"	Well No. 11	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-603-5013
Location				
Unit Letter G	: 1720	Feet From The North	Line and 1750	Feet From The East
Section 34	Township 32N	Range 17W	NMPM,	San Juan County

#### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 307 - 17th St., Ste 5300, Denver, CO 80202-5653					
Gary-Williams Energy Corporation	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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.D.T.D.		
Elevations (D.F., 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
OIL CON. DIV.			

#### 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

#### 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.

Signature Patrick Woosley  
Printed Name Patrick Woosley  
Date 12/6/93  
Telephone No. 303-565-2458

#### OIL CONSERVATION DIVISION

DEC 14 1993

Date Approved \_\_\_\_\_  
By Barry Chang  
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.
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- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.



APA Development.  
NAVAJO P#1  
E-35-32N17W.  
1950N 610W  
45-11198

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 *APA Development Corp.*

*% NMOCO*

3. Address and Telephone No.

*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

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

*35-32N-17W 1950/N-610/W*

5. Lease Designation and Serial No.

*14-20-600-3540*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*1 Navajo P*

9. API Well No.

*30045 87062*

10. Field and Pool, or Exploratory Area

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

☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOCO Contract Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date *8/17/00*

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

SECTION



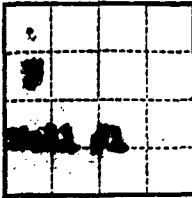
(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_

Survey - No. \_\_\_\_\_  
Allotted \_\_\_\_\_

Lease No. 24-28-600-3500



SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Well No. 2-D is located 1990 ft. from N line and 430 ft. from E line of sec. 35  
24-28-600-3500 (Range) 35 (Twp.) 24 (Range) 28 (Meridian)  
Unidentified Gallup (Field) San Juan (County or Subdivision) New Mexico (State or Territory)

The elevation of the derrick floor above sea level is 5791 ft. (est.)

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill well No. 1 to around 1475' to test Gallup formation. Our casing program is as follows:

- 25' - 2-1/2" 9.5# J-55 Casing - To be cemented with 10 sacks regular cement.
- 1475' - 4-1/2" 9.5# J-55 Casing - To be cemented with 75 sacks regular cement w/ 1/4 gal and 25% gilsonite per sack and 25 sacks regular w/ 2% calcium chloride.

ILLEGIBLE

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY

Address Box 28

Hobbs, New Mexico

By J. W. George  
Title Asst. Dist. Supt.



## NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

## SECTION A.

Date May 3, 1963

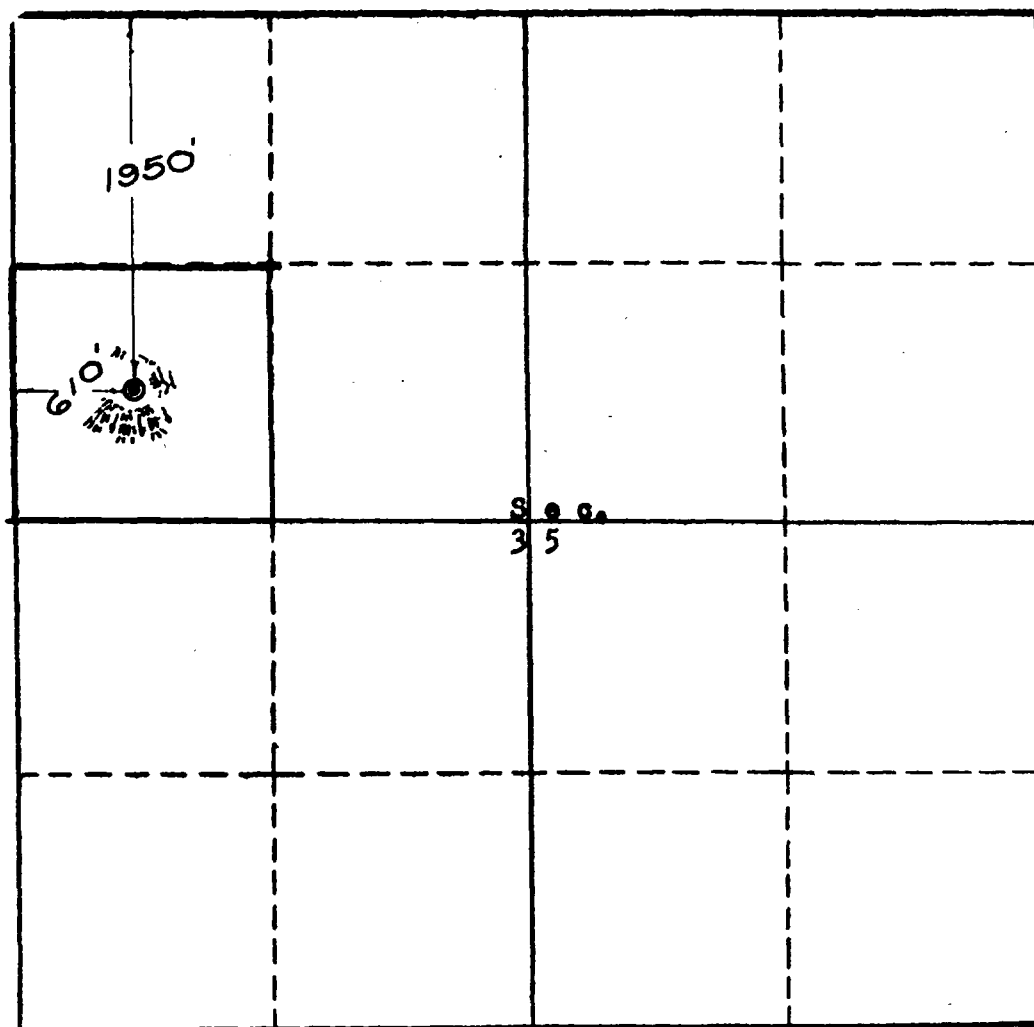
Operator Skelly Oil Company Lease Navajo "P"  
 Well No. 1 Unit Letter E Section 35 Township 32 North Range 17 West NMPM  
 Located 1950 Feet From North Line, 610 Feet From West Line  
 County San Juan G. L. Elevation 5791 Dedicated Acreage 40 Acres  
 Name of Producing Formation Gallup Pool Undesignated Gallup

1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_. If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

## SECTION B.



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY

(OPERATOR)

*J. W. George*  
 (REPRESENTATIVE)

Box 38, Hobbs, New Mexico

(ADDRESS)

STATE OF NEW MEXICO  
 I, E. V. Lichowick, do hereby certify that the well location shown on the plat in Section B 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 May 2, 1963

Four States Engineering Co.  
 FARMINGTON, NEW MEXICO

*Ernest V. Lichowick*  
 REGISTERED ENGINEER OR  
 LAND SURVEYOR

Certificate No. 3602



NUMBER OF COPIES RECEIVED		4
DISTRIBUTION		
SANTA FE		
FILE		
U.S.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
PRODUCTION OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico  
REQUEST FOR (OIL) - ~~(GAS)~~ ALLOWABLE

(Form C-104)  
Revised 7/1/57

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico May 21, 1963  
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Shelly Oil Company Navajo #2, Well No. 1, in SW 1/4, NW 1/4,  
(Company or Operator) (Lease)  
E, Sec. 35, T. 36N, R. 17W, NMPM, Undesignated Gallup Pool  
Unit Letter

San Juan

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Section 35

County Date Spudded 5/1/63 Date Drilling Completed 5/2/63  
Elevation 5791' Total Depth 1795' PBD 1793'  
Top Oil/Gas Pay 1651' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1651' - 1657'

Open Hole --- Depth Casing Shoe 1698' Depth Tubing 1644'

OIL WELL TEST -

Natural Prod. Test: --- bbls. oil, --- bbls water in --- hrs, --- min. Size ---  
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 150 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size ---

GAS WELL TEST -

Natural Prod. Test: --- MCF/Day; Hours flowed --- Choke Size ---  
Method of Testing (pitot, back pressure, etc.): ---  
Test After Acid or Fracture Treatment: --- MCF/Day; Hours flowed ---  
Choke Size --- Method of Testing: ---

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated w/ 33,400 gals. 1st oil & 30,000# 20/40 sand

Casing Tubing Date first new  
Press. Press. oil run to tanks May 12, 1963

Oil Transporter McHard Corp

Gas Transporter

Remarks: Well Pumped 120 barrels oil in 24 hours.

ILLEGIBLE

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved MAY 22 1963, 19.

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

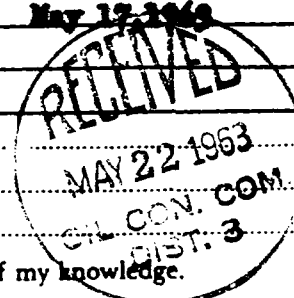
SHelly OIL COMPANY  
(Company or Operator)

By: J. W. George  
(Signature)

Title Assistant District Superintendent

Send Communications regarding well to:

Name Shelly Oil Company





DEVIATION AFFIDAVIT

Date May 21, 1963

New Mexico Oil Conservation Commission

1000 Rio Brancos Road

Astec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of May 19 63, Scott Bros. Drilling Company ran the following surveys for Skelly Oil Company on their Navajo "P" lease, Well No. 1, in SW 1/4 of SW 1/4 of Section 15-32N-17W NMPH, Undesignated Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
<u>500'</u>	<u>3/4</u>		
<u>1000'</u>	<u>3/4</u>		
<u>1500'</u>	<u>1/4</u>		

ILLEGIBLE



Subscribed and sworn to before me this 21st day of May 19 63

Jesse W. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

J. W. George  
Name  
Assistant District Superintendent  
Position

Box 36, Hobbs, New Mexico  
Address

Form 9-381 b  
(April 1962)




ILLEGIBLE

SUBMIT IN TRIPLICATE

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Budget Bureau No. 49-R388.6  
Approval expires 12-31-60.

Indian Agency \_\_\_\_\_

Navajo Res.

Allottee Mountain Tribal

Lease No. 14-28-400-340

## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	<b>XX</b>
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	<u>Perforating &amp; Fracturing</u>	<b>XX</b>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Hobbs, New Mexico May 28, 1963

Navajo "P"  
Well No. 1 is located 1970 ft. from N line and 610 ft. from W line of sec. 35

SW 1/4 NW 1/4 Sec. 35  
(1/4 Sec. and Sec. No.)

32-N  
(Twp.)

17-W  
(Range)

N.M.P.M.  
(Meridian)

Undesignated Gallup  
(Field)

San Juan  
(County or Subdivision)

New Mexico MAY 31 1963  
(State or Territory)

The elevation of the derrick floor above sea level is 5771 ft.

U. S. GEOLOGICAL SURVEY  
SALAMINGTON, NEW MEXICO

### DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Well spudded May 4, 1963. Set 8-5/8" OD casing at 19' and cemented with 17 sacks by hand. W.O.C. 24 hrs. Drilled to 1653'.

Core No. 1 - 1653' - 1673' (20') - Recovered 20'

Top - 5' - Light gray sand with good stain & odor saturated with oil throughout  
Bottom - 15' - Shale

Reached total depth of 1705' on May 8, 1963. Set 4-1/2" OD casing at 1698' and cemented with 100 sacks, W.O.C. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1692'. P.B.T.B. 1692'. Perforated 4-1/2" OD casing from 1651-1657' for a total of 6' and 24 holes. Treated through 4-1/2" OD casing perfor. 1651-1657' with 33,000 gallons of lease oil & 90,000# 20/40 sand. After recovering all lease oil well pumped 150 barrels of oil in 24 hours.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 38

Hobbs, New Mexico

By (ORIGINAL) H. E. Asb

Title Dist. Supt.

NUMBER OF COPIES RECEIVED		5
DISTRIBUTION		
SAN FRANCISCO		
PULL		
U.S.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
PRODUCTION OFFICE		
OPERATOR		

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*B.T.*

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>SHALLY OIL COMPANY</b>				Lease <b>NAVAJO #7</b>		Well No. <b>1</b>	
Unit Letter <b>E</b>	Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Undesignated Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal-Indian</b>			
If well produces oil or condensate give location of tanks			Unit Letter	Section	Township	Range	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>McWood Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>330 Petroleum Bldg., Abilene, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Gas wanted - waiting for gas connection.**

**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

- New Well ..... ☒ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate . . ☐

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **21** day of **May**, 19 **63**.

OIL CONSERVATION COMMISSION		By
Approved by	Original Signed Emery C. Arnold	<i>J. W. George</i> Assistant District Superintendent
Title	Supervisor Dist. # 8	Company <b>Shally Oil Company</b>
Date	<b>MAY 22 1963</b>	Address <b>Box 38, Hobbs, New Mexico</b>

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.S.R.	
LAND OFFICE	
TRANSPORTER	OIL
PRODUCTION OFFICE	GAS
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*BT.*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #7</b>		Well No. <b>1</b>	
Unit Letter <b>E</b>	Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Muddy Rodas Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>E</b>	Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 1540, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes _____ No <input checked="" type="checkbox"/> _____							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas wanted - waiting for gas connection.**

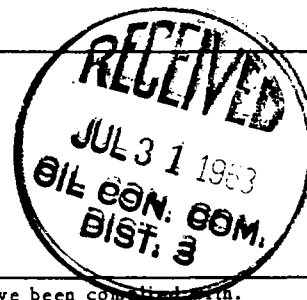
**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below) \_\_\_\_\_  
 Oil ..... ☒ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate . ☐

**ILLEGIBLE**

Remarks

**Oil transporter to be changed effective August 1, 1963.**



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **31** day of **July**, 19 **63**.

OIL CONSERVATION COMMISSION		By
Approved by Original Signed By <b>A. R. KENDRICK</b>		<i>J. W. Gump</i>
Title <b>PETROLEUM ENGINEER DIST. NO 3</b>		<b>Assistant District Superintendent</b>
Date <b>JUL 31 1963</b>		Company <b>Shelly Oil Company</b>
		Address <b>Box 730, Hobbs, New Mexico</b>

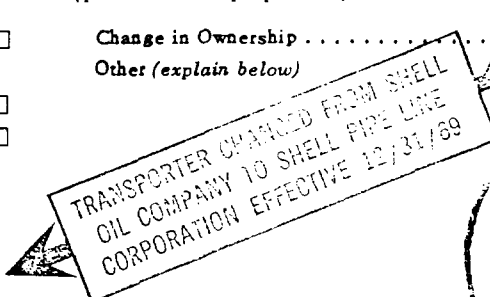

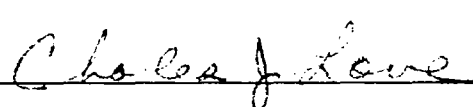
NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*BT*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "up"</b>		Well No. <b>1</b>									
Unit Letter <b>up</b>	Section <b>33</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>											
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>											
If well produces oil or condensate give location of tanks		Unit Letter <b>up</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>										
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 1588 - Farmington, New Mexico</b>											
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>															
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>  <b>None</b>		Date Connected	Address (give address to which approved copy of this form is to be sent)												
If gas is not being sold, give reasons and also explain its present disposition:  <b>waiting on gas connection - Gas being vented.</b>															
<p align="center"><b>REASON(S) FOR FILING (please check proper box)</b></p> <table> <tr> <td>New Well <input type="checkbox"/></td> <td>Change in Ownership <input type="checkbox"/></td> </tr> <tr> <td>Change in Transporter (check one)</td> <td>Other (explain below)</td> </tr> <tr> <td>Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/></td> <td></td> </tr> </table>								New Well <input type="checkbox"/>	Change in Ownership <input type="checkbox"/>	Change in Transporter (check one)	Other (explain below)	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>		Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
New Well <input type="checkbox"/>	Change in Ownership <input type="checkbox"/>														
Change in Transporter (check one)	Other (explain below)														
Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>															
Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/>															
<div style="text-align: center;">   </div>															
Remarks  <b>Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.</b>															
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.															
Executed this the <b>24th</b> day of <b>April</b> , 19 <b>64</b> .															
OIL CONSERVATION COMMISSION				By											
Approved by  <b>Original Signed Emery C. Arnold</b>				 Title <b>Dist. Engineer</b>											
Title  <b>Supervisor Dist. # 3</b>				Company  <b>Skelly Oil Company</b>											
Date  <b>APR 27 1964</b>				Address  <b>Box 730 - Hobbs, New Mexico</b>											

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN ALLOTTEE OR TRIBE NAME <b>Navajo-9th Mountain Tribal</b>	
2. NAME OF OPERATOR <b>Shelly Oil Company</b>		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR <b>P.O. Box 730, Hobbs, New Mexico</b>		8. FARM OR LEASE NAME <b>Navajo "F"</b>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>1930' FWL and 610' FWL of Section 33-22N-17W</b>		9. WELL NO. <b>1</b>	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT <b>Harry Rocky Gallup</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>3791 GR</b>		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA <b>Section 33-22N-17W</b>	
		12. COUNTY OR PARISH <b>San Juan</b>	
		13. STATE <b>New Mexico</b>	

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input checked="" type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(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 pertinent to this work.)\*

1. Move in and rig up pulling unit, pull rods and tubing.
2. Clean out to 1492' FWH.
3. Sand free with 4,000# 20/40 sand, 200# of parachek-F and 300# of Malschek in 4,000 gallons lease crude.
4. Run rods and tubing.
5. Test and return well to a producing status.

ILLEGIBLE

RECEIVED

OCT 21 1966

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

RECEIVED

OCT 24 1966  
OIL CON. COM

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

SIGNED

(ORIGINAL) **H. E. Axt**

TITLE

**District Superintendent**

DATE

**October 18, 1966**

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

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

Shelly Oil Company

3. ADDRESS OF OPERATOR

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

1950' FWL and 610' FWL of section 35-32N-17W

14. PERMIT NO.

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

5791' GR

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Navajo-Use Mountain Tribe

14-30-600-3140

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo "P"

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Navajo-Use Mountain

11. SURVEY OR AREA

Section 35-32N-17W

12. COUNTY OR PARISH, IS. STATE

San Juan

New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENTS

(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 pertinent to this work.)\*

1. Moved in and rigged up guilling unit and pulled rods and tubing.

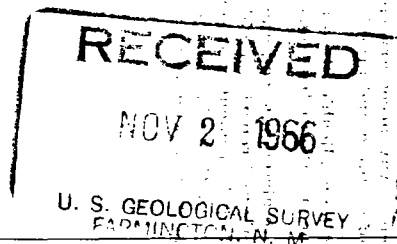
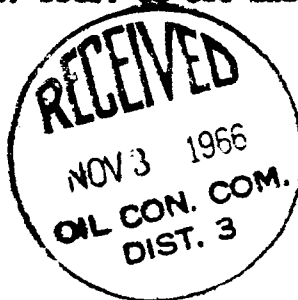
2. Cleaned out to 1692' P.B.T.D.

3. Treated perfs. 1651-1657' with 4000# 20-40 sand, 4000 gals. lease oil, 300# of Dowell's Gyp-Ram and 300# of Dowell's L-27.

4. Ran rods and tubing.

5. Pumped and tested well for several days, returned well to production schedule October 28, 1966. Well pumped 17 bbls. of oil and 14 bbls. of water in 24 hours.

ILLEGIBLE



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

SIGNED (ORIGINAL) (SIGNED) H. E. Aas

TITLE District Superintendent

DATE October 31, 1966

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

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

5. Lease Designation and Serial No.  
**420 600 3540**

6. If Indian, Allottee or Tribe Name  
**NAVAJO TRIGAL**

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
**NO 1 NAVAHO P.**

9. API Well No.  
**3004587062**

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

11. County of Parish, State  
**SAN JUAN N.M.**

**SUBMIT IN TRIPLICATE**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

**APA Development**

3. Address and Telephone No.

**PO Box 1093 Shiprock NM 87420**

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

**1850 FNL 610 FWL Sec 25 Lease 420  
600-3540, S-T-32N, R-17W**

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

☐ 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.)\*

**(i) NO 1 NAVAHO P 1850 FNL + 610 FWL Sec 25 Lease  
# 1420 600 3540 -  
This well to be serviced + put into production  
within 90 days -**

RECEIVED  
JUN 1 1997  
OIL CON. DIV.  
DIST. 3

600-3540  
JUN 1 1997  
11:30 AM

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

Signed

**William E. Brown**

Title

**Pres.**

Date

**6-1-97**

(This space for Federal or State office use)

Approved by **/s/ Donna W. Spencer**  
Conditions of approval, if any:

Title

Date

**JUN - 4 1997**



Heaving plug—Material \_\_\_\_\_ Length \_\_\_\_\_ Depth set \_\_\_\_\_

Adapters—Material \_\_\_\_\_ Size \_\_\_\_\_

### SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" casing perfor. 1651-1657' with 33,600 gallons of lease oil and 30,000# 20/40 sand.						

### TOOLS USED

Rotary tools were used from \_\_\_\_\_ feet to **2705** feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

Cable tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

### DATES

\_\_\_\_\_, 19\_\_\_\_

Put to producing \_\_\_\_\_ **May 17** \_\_\_\_\_

The production for the first 24 hours was **150** barrels of fluid of which **99.9** % was oil; **0** % emulsion; **0** % water; and **.1** % sediment. Gravity, °Bé. **41.0**

If gas well, cu. ft. per 24 hours \_\_\_\_\_ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_

Rock pressure, lbs. per sq. in. \_\_\_\_\_

### EMPLOYEES

\_\_\_\_\_, Driller

\_\_\_\_\_, Driller

**Johnston** \_\_\_\_\_, Driller

\_\_\_\_\_, Driller

**Odom** \_\_\_\_\_

### FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	191	191	Sand and Shale
191	1915	1124	Sand and Shale - Top Manassas - 191'
1315	1907	192	Sand and Shale - Top Middle Gallup - 1315'
1907	1690	143	Sand and Shale - Top Lower Gallup - 1907'
1690	1668	18	Sand and Shale - Top Tecate Sand - 1690'
1668	1705	37	Sand and Shale - Top Samastee - 1668'
	1705	Total Depth	
	1692	Plugged Back	
		Total Depth	
		Geological tops by Schlumberger Induction - Gamma Ray Log.	

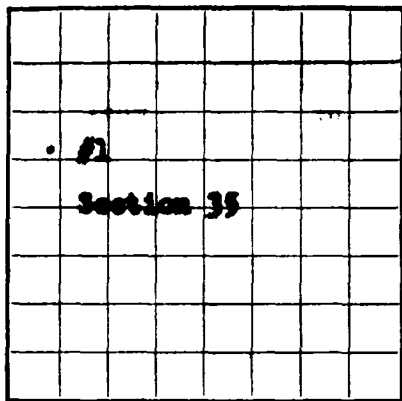
**Core No. 1 - 1651' - 1673' (22') - Recovered 22'**

Top - 5' - Light gray sand with good stain and odor saturated with oil throughout  
Next - 15' - Shale

ILLEGIBLE

FROM—	TO—	TOTAL FEET	FORMATION
-------	-----	------------	-----------

FORMATION RECORD—Continued



LOCATE WELL CORRECTLY

 U. S. LAND OFFICE ~~Window Rock~~  
 SERIAL NUMBER ~~14-20-600-3549~~  
 LEASE OR PERMIT TO PROSPECT ~~None~~

 UNITED STATES  
 DEPARTMENT OF THE INTERIOR  
 GEOLOGICAL SURVEY

# ILLEGIBLE

## LOG OF OIL OR GAS WELL

Company ~~Shelly Oil Company~~ Address ~~Box 38 - Hobbs, New Mexico~~  
 Lessor or Tract ~~Navajo NP~~ Field ~~Undesignated Gallup~~ State ~~New Mexico~~  
 Well No. ~~1~~ Sec. ~~35~~ T. ~~32 N.~~ R. ~~17 W.~~ Meridian ~~N. H. P. M.~~ County ~~San Juan~~  
 Location ~~1950~~ ft. ~~S.~~ of ~~N.~~ Line and ~~610~~ ft. ~~E.~~ of ~~N.~~ Line of ~~Section 35~~ Elevation ~~5793~~  
 (Derrick base relative to spot)  
 The information given herewith is a complete and correct record of the well and all work done thereon  
 so far as can be determined from all available records.  
 Signed ~~(original) H. E. Aab~~

Date ~~May 25, 1963~~ Title ~~Dist. Supt.~~

The summary on this page is for the condition of the well at above date.

Commenced drilling ~~May 4~~, 19 ~~63~~ Finished drilling ~~May 8~~, 19 ~~63~~

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from ~~1651~~ to ~~1656~~ No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
8-5/8"	29	8	AMERICAN	100	Button	Surface	Surface	Surface	Drilling
4-1/2"	16.90	8	AMERICAN	100	Button	Surface	Surface	Surface	Drilling
HISTORICAL OR OIL OR GAS WELL									

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
8-5/8"	19'	17	By Hand	—	—
4-1/2"	1690'	100	Pump & Plug	—	—

## PLUGS AND ADAPTERS

NO. OF COPIES RECEIVED	7
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

I. Operator  
Getty Oil Company  
Address  
Box 3360, Casper, Wyoming 82602  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 1	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal State, Federal or Fee	Lease No. 14-20-600-3540
Location Unit Letter E ; 1920 Feet From The North Line and 610 Feet From The West Line of Section 35 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, NM					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Ege. 17W	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.
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)

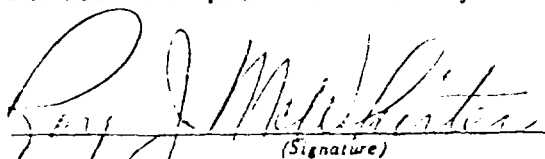
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

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

CERTIFICATE OF COMPLIANCE

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

  
(Signature)

Area Superintendent  
(Title)

2/4/77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 15 1977, 19

ORIGINAL SIGNED BY R. L. MAXWELL, JR.

BY

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	1
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	3
PRORATION OFFICE	

I. Operator  
WTR Oil Company  
Address  
P.O. Drawer LL, Cortez, Colorado 81321  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name and address of previous owner  
Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 1	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal State, Federal or Fee 14-20-600	Lease No. 3540
Location Unit Letter E ; 1950 Feet From The North Line and 610 Feet From The West Line of Section 35 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, NM 87401			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Pge. 17W
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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Hooley  
(Signature)  
co-operator  
(Title)  
9/11/79  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED SEP 12 1979, 19  
BY Original Signed by A. R. Kendrick  
TITLE SUPERVISOR DISTRICT # 8

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator

WTR OIL COMPANY

Address

Drawer LL, Cortez, Colorado 81321

Reason(s) for filing (Check proper box)

New Well

☐

Recompletion

☐

Change in Ownership

☐

Change in Transporter of:

Oil

☒

Dry Gas

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "p"	Well No. 1	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location				
Unit Letter E	: 1950	Feet From The North	Line and 610	Feet From The West
Line of Section 35	Township 32N	Range 17W	NMPM, San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, CR, 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

*Lee E. Leary*  
(Signature)

Office Manager

8-24-82  
(Date)

OIL CONSERVATION COMMISSION

AUG 25 1982

APPROVED

Original Signed by FRANK T. CHAVEZ

BY

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multiply

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator BayStar Petroleum Corporation	
Address P. O. Box 2975, Corpus Christi, Texas 78403	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Navajo "P"</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Many Rocks Gallup</u>	Kind of Lease <u>Navajo Federal</u> State, Federal or Fee	Lease No. <u>14-20-600-3540</u>
Location				
Unit Letter <u>E</u>	<u>1950</u>	Feet From The <u>North</u> Line and <u>610</u>	Feet From The <u>West</u>	
Line of Section <u>35</u>	Township <u>32N</u>	Range <u>17W</u>	, NMPM, <u>San Juan</u> County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Ciniza Pipe Line, Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1887, Bloomfield, NM 87413</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit <u>C</u>	Sec. <u>34</u>
	Twp. <u>32N</u>	Rge. <u>17W</u>
	Is gas actually connected? <input type="checkbox"/> 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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, CR, 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 2, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 6 1985  
BY Frank J. O'Leary  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply

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 A.P.A. Development Inc.		Well API No.
Address P.O. Box 215, Cortez, CO 81321		
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 checked="" 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 Navajo "P"	Well No. 1	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee	Navajo 14-20-600-3540
Location Unit Letter E : 1950 Feet From The North Line and 610 Feet From The West Line Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Giant Refining Company	<input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499				
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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.	MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	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.

Signature  
Patrick B. Woosley  
Printed Name  
Patrick B. Woosley  
Date  
8/7/90  
Operator  
Title  
(303) 565-2458  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved  
AUG 28 1990  
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

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA SEP 9 1985 RECEIVED	5. LEASE DESIGNATION AND SERIAL NO. 14-20-600-3540
2. NAME OF OPERATOR BayStar Petroleum Corporation		6. IF INDIAN ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1950' fnl + 610' fw1		8. FARM OR LEASE NAME Navajo P
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5,791' GR	9. WELL NO. #1
		10. FIELD AND POOL, OR WILDCAT Mary Rocks Gallup
		11. SEC., T., R., E., OR BLK. AND SURVEY OR AREA Sec 35 T32N R17W
		12. COUNTY OR PARISH San Juan
		13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
(Other) ☐

PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
ABANDON\* ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☒  
(Other) ☐

REPAIRING WELL ☐  
ALTERING CASING ☐  
ABANDONMENT\* ☐

(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 pertinent to this work.)\*

Work performed on 8/5/85. Pumped 4 barrels of water down surface to test packer at 16 18, packer held. Mixed 1 barrel Turflow to 3 barrels water. Pumped 4 barrels of chemical down tubing and 2.78 barrels of water to fill tubing. Displaced acid into formation with 4 barrels of water. @ 1/4 barrel per minute. Shut in over night. Swabed dig next 2 days and put on pump 8/8/85.  
Production before: 30 Barrels of water 1 Barrel of oil.  
Production after: 60 Barrels of water 4 Barrels of oil

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

SIGNED

*David Walker*

TITLE

Geologist

DATE

9/1/85

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

RECEIVED

SEP 20 1985

ACCEPTED FOR RECORD

DATE

SEP 19 1985

\*See Instructions on Reverse Side

NMOCIL CON. DIV.

FARMINGTON RESOURCE AREA

BY *Sm*



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

RECEIVED

OCT 17 1988

OIL CON. DIV.

DIST. 3

REQUEST FOR ALLOWABLE  
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator A.P.A. Development Corporation

Address P.O. Box 215, Cortez, Colorado 81321

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership			

Other (Please explain)

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Navajo "P"</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Many Rocks Gallup</u>	Kind of Lease <u>Navajo</u> State, Federal or Fee <u>14-20-600-3540</u>	Lease No.
Location				
Unit Letter <u>E</u> : <u>1950</u> Feet From The <u>North</u> Line and <u>610</u> Feet From The <u>West</u>				
Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Ciniza Pipe Line, Inc.</u>	<u>P.O. Box 1887, Bloomfield, NM 87413</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rgs. Is gas actually connected? When
	<u>C</u> <u>34</u> <u>32N</u> <u>17W</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Patrick B. Woolley  
(Signature)  
Operator  
(Title)  
10-12-88  
(Date)

OIL CONSERVATION DIVISION

OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Burt J. Shaw  
TITLE SUPERVISION DISTRICT #3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms 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

I. Operator A.P.A. Development, Inc.		Well API No. 300458706200S1
Address P.O. Box 215, Cortez, CO 81321		
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 checked="" 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 Navajo "P"	Well No. 1	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-600-3540
Location Unit Letter <u>E</u> : <u>1950</u> Feet From The <u>North</u> Line and <u>610</u> Feet From The <u>West</u> Line Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary-Williams Energy Corporation	Address (Give address to which approved copy of this form is to be sent) 370 - 17th St., Ste 5300, Denver, CO 80202-5653	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34
	Twp. 32N	Rge. 17W
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
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (D.F., RKB, RI, 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 of well (or 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 DEC 14 1993
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	GAS-MCP OIL CON. DIV. DIST. 3

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MNCF	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.

Signature Patrick Woosley Operator  
Printed Name Patrick Woosley Title 303-565-2458  
Date 12/6/93 Telephone No. 303-565-2458

OIL CONSERVATION DIVISION

Date Approved DEC 14 1993  
By Barry D. Chaff  
Title SUPERVISOR DISTRICT 13

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.



APA Development,  
NAVASO P #2  
K-35-32N 17W  
1920 S 1810 W  
45-11158

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 *APA Development Corp.*

*% NMOC*

3. Address and Telephone No.

*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

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

*35-32N-17W 1920/S-1810/W*

5. Lease Designation and Serial No.

*14-20-600-3540*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*2 Navajo P*

9. API Well No.

*3004511158*

10. Field and Pool, or Exploratory Area

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

☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOC* *Contract* *Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by  
Conditions of approval, if any:

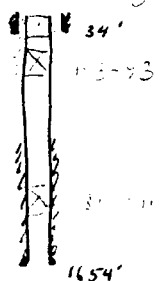
Title

Date *8/17/00*

API NUMBER	30-045-11158	30-045-11158	30-045-11158	30-045-11158
OPERATOR NAME	APA DEVELOPMENT CORP	WELL NUMBER	2	
PROPERTY NAME	NAVAJO P			
SECTION 35	TOWNSHIP 32N	RANGE	17W	
FOOTAGE	1920 FSL 1810 FWL UL "K"			
	Sur Csg OD NA HOLE	7 5/8	XX	XX
	SUR CSG TD	34	XX	XX
	SUR CSG WT	17.7	XX	XX
	TOP OF CMT	0	XX	XX
	ACTUAL		XX	XX
	CACULATED	10SX	XX	XX
	PROD CSG OD 6 1/4	4 1/2	XX	XX
	PROD CSG TD	1654	XX	XX
	PROD CSG WT	9.5	XX	XX
	TOP OF CMT	800	XX	XX
FORMATION TOP	ACTUAL	EST	XX	XX
GALLUP 1263	CACULATED	100SX	XX	XX
MANCOS 143'	PERF TOP	1596	XX	XX
	PERF BOTTOM	1605	XX	XX
	PACKER		XX	XX
	TYPE OF PLUG		XX	XX
	CIBP & CMT		XX	XX
	CMT		XX	XX

### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOO H W/RODS & TUBING, PICK UP WORK STRING, CIRC HOLE  
 SPOT 14 SX PLUG @1313-1163 WOC TAG, FILL AS REQUIRED  
 PERF @ 193 PUMP 32 SX PLUG 193-93, 18 IN, 14 OUT, IF CIRC BRING TO SURF.  
 PERF @ 84' CIRC CEMENT TO SURFACE, EST 20 SX  
 CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS,  
 Close pits according to guidelines: Clean and level location



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_

Survey - No. \_\_\_\_\_

Allottee \_\_\_\_\_

Lease No. \_\_\_\_\_


SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL _____	2	SUBSEQUENT REPORT OF WATER SHUT-OFF _____	
NOTICE OF INTENTION TO CHANGE PLANS _____		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING _____	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF _____		SUBSEQUENT REPORT OF ALTERING CASING _____	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL _____		SUBSEQUENT REPORT OF REDRILLING OR REPAIR _____	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE _____		SUBSEQUENT REPORT OF ABANDONMENT _____	
NOTICE OF INTENTION TO PULL OR ALTER CASING _____		SUPPLEMENTARY WELL HISTORY _____	
NOTICE OF INTENTION TO ABANDON WELL _____			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

May 9, 1963

Survey No. \_\_\_\_\_

Well No. 2 is located 1900 ft. from S line and 1810 ft. from W line of sec. 35

54 Sec. 35

(1/4 Sec. and Sec. No.)

23E

(Twp.)

17N

(Range)

10W

(Meridian)

Indefinite Gullup

(Field)

San Juan

(County or Subdivision)

New Mexico

(State or Territory)

The elevation of the derrick floor above sea level is 5730 ft. (est.)

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 2 to around 1675' to test Gullup formation.

Our casing program is as follows:

- 30' - 7-1/8" OD 26.15 lb/ft 3-55 Casing - to be cemented with 10 sacks regular cement.
- 1675' - 4-1/2" OD 9.55 lb/ft 3-55 Casing - to be cemented with 75 sacks regular cement w/ 4% gel and 25% gilsonite and 25 sacks regular w/ 2% calcium chloride.

ILLEGIBLE



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY

Address Box 36

Robbs, New Mexico

By

Title Asst. Dist. Supt.

# NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

### SECTION A.

Date May 9, 1963

Operator Skelly Oil Company Lease Nevada NP  
Well No. 2 Unit Letter E Section 35 Township 32 North Range 37 West NMPM  
Located 1920 Feet From South Line, 1810 Feet From West Line  
County San Juan G. L. Elevation 5730 Dedicated Acreage 40 Acres  
Name of Producing Formation Gallup Pool Undesignated Gallup

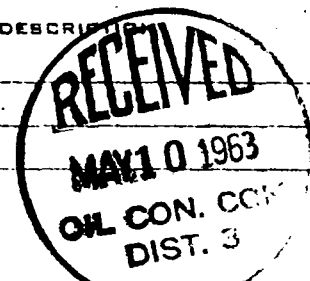
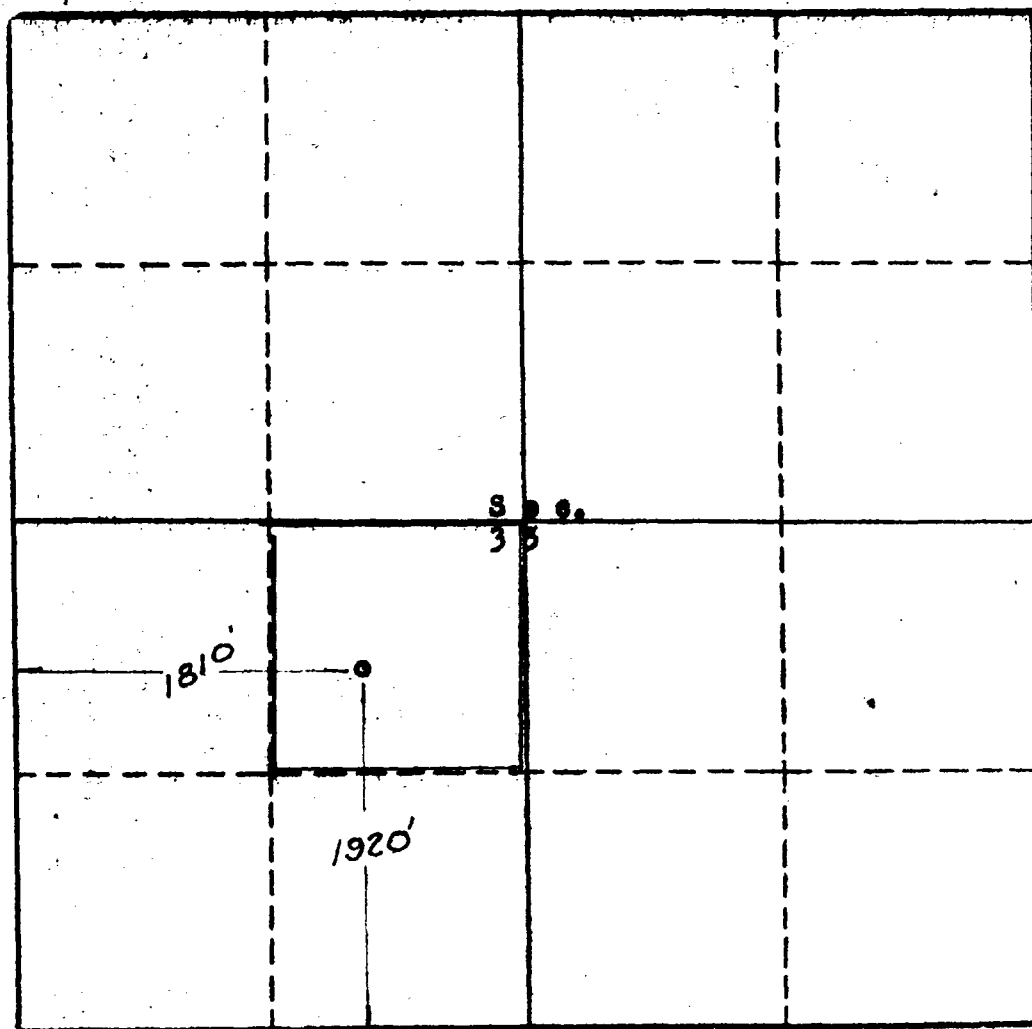
1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes No If answer is "Yes," Type of Consolidation
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

ILLEGIBLE

### SECTION B.



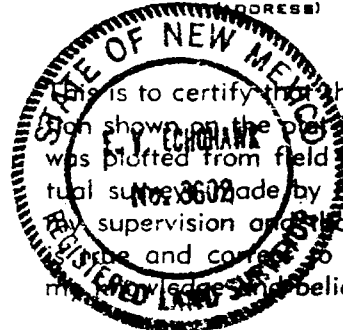
This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY

(OPERATOR)

*J. W. George*  
(REPRESENTATIVE)

Box 38, Hobbs, New Mexico  
(ADDRESS)



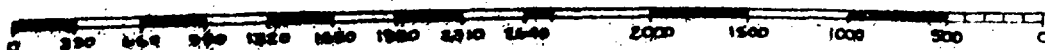
This is to certify that the well location shown on the plat in Section B was plotted from field notes of actual survey made by me or under my supervision and that the same are true and correct to the best of my knowledge and belief.

Date Surveyed May 8, 1963

Four States Engineering Co.  
FARMINGTON, NEW MEXICO

*Edward H. Eashank*  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602





Form 9-881 b  
(April 1952)

Sec. 35		
• 72		



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Budget Bureau No. 49-R246.4  
Approval expires 12-31-60.

Indian Agency Havaje Mts

Allottee Mountain Tribal

Lease No. 14-22-400-3540

## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	<b>XX</b>
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	<b>Perforating &amp; Fracturing</b>	<b>XX</b>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Hobbs, New Mexico May 20, 1963

Havaje "P"  
Well No. 2 is located 1920 ft. from **EX** line and 1410 ft. from **EW** line of sec. 35

NE 1/4 Sec. 35  
(4 Sec. and Sec. No.)

32-N  
(Twp.)

17-W  
(Range)

N.M.P.M.  
(Meridian)

Undesignated Gallup  
(Field)

San Juan  
(County or Subdivision)

New Mexico  
(State or Territory) **MAY 31 1963**

The elevation of the derrick floor above sea level is 5730 ft.

### DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudlogging jobs, cementing points, and all other important proposed work)

Well spudded May 10, 1963. Set 7-5/8" OD casing at 34' and cemented with 10 sacks by hand. W.O.G. 24 hrs. Drilled to 1593'.

Core No. 1 - 1593' - 1613' - Recovered 20'

Top - 3' - Shale

Next - 9' - Gray sand saturated with oil

Next - 8' - Shale

Reached total depth of 1660' on May 13, 1963. Set 4-1/2" OD casing at 1634' and cemented with 100 sacks. W.O.G. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1640'. P.B.T.B. 1640'. Perforated 4-1/2" OD casing from 1596-1605' for a total of 9' and 36 holes. Treated through 4-1/2" OD casing perfs. 1596-1605' with 29,000 gallons of lease oil & 30,000 20/40 sand. After recovering all lease oil well pumped 120 barrels of oil in 24 hours.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 36

Hobbs, New Mexico

By **(ORIGINAL)** H. E. Asb

Title Dist. Supt.



NUMBER OF COPIES RECEIVED		DISTRIBUTION	
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FILE			
U.S.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
PRODUCTION OFFICE			
OPERATOR			

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
[Stamp]

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico

May 27, 1963

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Shelly Oil Company

Navajo

Well No. 2, in NE  $\frac{1}{4}$  SW  $\frac{1}{4}$ ,

(Company or Operator)

(Lease)

K, Sec. 35, T. 32N, R. 17W, NMPM., Undesignated Gallup Pool

Unit Letter

San Juan

County. Date Spudded 5/10/63

Date Drilling Completed 5/13/63

Please indicate location:

Elevation 9190' EL Total Depth 1660' PBDT 1660'

Top Oil/Gas Pay 1596' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1596'-1605'

Open Hole — Depth 1654' Depth Casing Shoe 1571'

OIL WELL TEST -

Natural Prod. Test: — bbls. oil, — bbls water in — hrs, — min. Choke Size —

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 120 bbls. oil, 0 bbls water in 24 hrs, 0 min. Choke Size —

GAS WELL TEST -

Natural Prod. Test: — MCF/Day; Hours flowed — Choke Size —

Method of Testing (pitot, back pressure, etc.): —

Test After Acid or Fracture Treatment: — MCF/Day; Hours flowed —

Choke Size — Method of Testing: —

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated 4/27, 800 gals. 100 oil & 30,000 20/40 sand

Casing Press. — Tubing Press. — Date first new oil run to tanks May 22, 1963

Oil Transporter McMack Corp.

Gas Transporter —

Remarks: Well pumped 120 barrels oil in 24 hours.

**ILLEGIBLE**

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved MAY 28 1963, 19—

Shelly Oil Company

(Company or Operator)

OIL CONSERVATION COMMISSION

Original Signed By

By: A. R. KENDRICK

Title PETROLEUM ENGINEER DIST NO 3

By: J. W. George

(Signature)

Title

Assistant District Superintendent

Send Communications regarding well to:

Name Shelly Oil Company

Address Box 38, Hobbs, New Mexico

DEVIATION AFFIDAVIT

Date May 27, 1963

New Mexico Oil Conservation Commission

1000 Rio Brazos Road

Astec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

ILLEGIBLE

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of May 19 63, Scott Bros. Drilling Company ran the following surveys for Skelly Oil Company on their Navajo SP lease, Well No. 2, in NE 1/4 of SW 1/4 of Section 33-12N-17W NMPM, Undesignated Oil Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
<u>500'</u>	<u>1/2</u>		
<u>1000'</u>	<u>1-1/4</u>		
<u>1500'</u>	<u>1-1/2</u>		

Subscribed and sworn to before me this 27th day of May 19 63

Jesse W. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

J. W. George  
Name

Assistant District Superintendent

Position

Box 38

Albino, New Mexico

Address

MAY 28 1963

COM.  
3

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	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

B.T.

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #70</b>		Well No. <b>2</b>	
Unit Letter <b>K</b>	Section <b>39</b>	Township <b>34N</b>	Range <b>17W</b>		County <b>San Juan</b>		
Pool <b>Undesignated Gallup</b>					Kind of Lease (State, Fed, Fee) <b>Federal-Indian</b>		
If well produces oil or condensate give location of tanks			Unit Letter	Section	Township	Range	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Mellor Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>330 Petroleum Bldg., Abilene, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

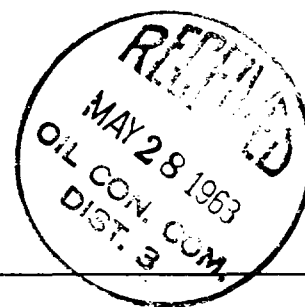
If gas is not being sold, give reasons and also explain its present disposition:  
**Gas vented - waiting for gas connection**

**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate . . ☐

Change in Ownership ..... ☐  
 Other (explain below)



Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **27** day of **May**, 19 **63**.

**OIL CONSERVATION COMMISSION**

Approved by  
 Original Signed By  
**A. L. KENDRICK**

Title  
**PETROLEUM ENGINEER DIST. NO. 3**

Date  
**MAY 28 1963**

By  
**J. W. George**  
 Title  
**Assistant District Superintendent**  
 Company  
**Shelly Oil Company**  
 Address  
**Box 38, Hobbs, New Mexico**

NUMBER OF COPIES RECEIVED	
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FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/>
PROBATION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*BT*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #7</b>		Well No. <b>2</b>	
Unit Letter <b>K</b>	Section <b>25</b>	Township <b>34N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Mary Leona Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>8</b>	Section <b>24</b>	Township <b>34N</b>	Range <b>17W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1540, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection.**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☒ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

**ILLEGIBLE**

Remarks

**Oil transporter to be changed effective August 1, 1963.**



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with

Executed this the 21 day of July, 19 63.

**OIL CONSERVATION COMMISSION**

Approved by

Original Signed By  
**A. R. KENDRICK**

Title

**PETROLEUM ENGINEER DIST. NO. 3**

Date

**JUL 31 1963**

By

Title

Company

Address

**Shelly Oil Company**

**Box 730, Hobbs, New Mexico**

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*BT.*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "P"</b>		Well No. <b>2</b>	
Unit Letter <b>"G"</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>"G"</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>				Address (give address to which approved copy of this form is to be sent) <b>Box 1588 - Farmington, New Mexico</b>			
<b>Shell Oil Company</b>							
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected		Address (give address to which approved copy of this form is to be sent)			
<b>None</b>							

If gas is not being sold, give reasons and also explain its present disposition:

**Waiting on gas connection - Gas being vented.**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☒ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)  
 TRANSPORTER CHANGE FROM EL PASO  
 OIL COMPANY TO SHELL OIL COMPANY  
 CORPORATION EFFECTIVE 12/31/69



Remarks

**Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **24th** day of **April**, 19 **64**.

OIL CONSERVATION COMMISSION		By <i>Charles J. Love</i>	
Approved by <b>Original Signed Emery C. Arnold</b>		Title <b>Dist. Engineer</b>	
Title <b>Supervisor Dist. # 3</b>		Company <b>Skelly Oil Company</b>	
Date <b>APR 27 1964</b>		Address <b>Box 730 - Hobbs, New Mexico</b>	

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

14-30-609-3340

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

None

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Hendrix F

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

King Rocks Gulch

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

Sec. 33-32N-17W

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

## 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

Shelly Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 730, Hobbs, New Mexico

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

See also space 17 below.)  
At surface

1930' PUL &amp; 1810' PUL Sec. 33-32N-17W

14. PERMIT NO.

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

5730' GR

16.

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) **Completion & Fracture**

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

☐  
☐  
☐  
☐  
☒

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

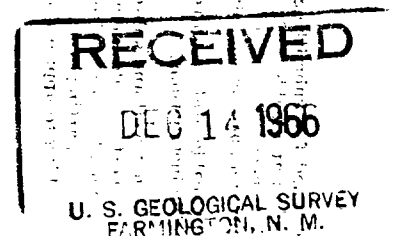
ABANDONMENTS

☐  
☐  
☐  
☐☐  
☐  
☐(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.) \*

1. Move in and rig up Pulling Unit.
2. Pull rods and tubing.
3. Clean well out to PRED 1640'.
4. Sand frac. thru 4 1/2" CD casing perfor. 1596-1605' with approximately 4000# 20/40 sand and 4000 gallons loose oil.
5. Clean well out to PRED 1640'.
6. Run tubing and rods.
7. Return well to a producing status.

Note: Please return approved copy to the above address.

ILLEGIBLE



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

SIGNED

(ORIGINAL)  
SIGNATURE H. E. Arb

TITLE

District Superintendent

DATE

December 12, 1966

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-600-3340

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

See

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Bavie "P"

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Harry Rocks Gallup

11. SEC., T., R., M., OR B.L. AND  
SURVEY OR AREA

Sec. 35-32N-17W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

## 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

Shelly Oil Company

3. ADDRESS OF OPERATOR

P. O. Box 730, Hobbs, New Mexico

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

1920' PUL &amp; 1810' PUL Sec. 35-32N-17W

14. PERMIT NO.

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

5730' GL

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) **Clean out and Fracture**(NOTE: Report results of multiple completion or Well  
Completion or Recompletion Report and Log form.)

REPAIRING WELL

ALTERING CASING

ABANDONMENTS

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 pertinent to this work.)\*

1. Moved in and rigged up pulling unit.
2. Pulled rods and tubing.
3. Treated through 4-1/2" casing perforations 1596-1605', with 4000 lbs. 20-40 sand, 4000 gallons lease oil, 300 lbs. Dowell Gyp-Ban and 200 lbs. Dowell L-27.
4. Cleaned well to F.B.T.D. 1640'.
5. Ran tubing and rods.
6. Pumped and tested. Well pumped 14 barrels of oil and 2 barrels of water in 24 hours. Returned well to production status December 27, 1966.

ILLEGIBLE

RECEIVED

JAN 3 1967

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N.M.

RECEIVED

JAN 4 1967

OIL CON. COM.  
DIST. 3

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

SIGNED (ORIGINAL) **H. E. Aab**TITLE **District Superintendent**DATE **December 29, 1966**

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

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

070 FARMINGTON, NM

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

A.P.A. Development, Inc.

3. Address and Telephone No.

Box 215 Cortez, CO. 81321

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

1920' FSL + 1810 FWL Sec. 35 T32N R17W  
K

5. Lease Designation and Serial No.

14-20-600 3540

6. If Indian, Allottee or Tribe Name

Navajo P

7. If Unit or CA, Agreement Designation

Navajo "P"

8. Well Name and No.

#2

9. API Well No.

3004511580051

10. Field and Pool, or Exploratory Area

Many Rocks

11. County or Parish, State

San Juan N.M.

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

- ☐ 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.)\*

Plan to Plug Well as follows:

1. Pump cement Plug from 1650' to 1450'
2. Pump fresh water from 1450' to 150'
3. Pump cement from 150' to surface
4. cut off well head, weld on dry hole marker.

RECEIVED  
JUL 17 1996

OIL CON. DIV.  
DIST. 3

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

Signed Leta Wordley

Title

Date

6/27/96

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any

Title

Date

RECEIVED

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

NMOCD



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

APA Development

3. Address and Telephone No.

P.O. Box 1083 Shiprock NM 87420

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

no 2 no 20 p

5. Lease Designation and Serial No.

1426 600-3540

6. If Indian, Allottee or Tribe Name

NAVAJO Tribe

7. If Unit or CA, Agreement Designation

8. Well Name and No.

NO 2 NAVAJO

9. API Well No.

10. Field and Pool, or Exploratory Area

Mary Wells

11. County or Parish, State

SAN JUAN

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  
☐ 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.)\*

abandoned well on by June 30 have a  
Blown Transformer Replacing with Trans for  
from other location. Repair within 30 days

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

Signed

William C. Server

Title

Pres

Date

6-28-97

(This space for Federal or State office use)

Approved by

Si Duane W. Spencer

Title

Date

JUN 30 1997

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

A P A Development Inc Colorado

3. Address and Telephone No.

4067 S.W. 97 Ct, Miami Fla 33165

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

1920 FSL & 1810FFWL Sec 35 T 32 N R 17 W

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo Tribal

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Number ~~14~~ Navajo P #

9. API Well No.

32-045-11158

10. Field and Pool, or Exploratory Area

Many Rocks, Gallup

11. County or Parish, State

San Juan N.M.

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 \_\_\_\_\_  
☒ 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.)

This Well Navajo 2 P Has been serviced ready to produce when it was turned on the power to the well didnot have electric on one line due to transformer problem. Cortez Elec too busy in Utah.  
This well has produced over 30,000 Barrels of Oil.  
Need an extension of time 6 Mo. Sept 1 to March 1 1998

RECEIVED  
SEP 17 1997

OIL O&G DIV  
BOSTON

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

Signed Duane W. Spencer

Title Pres. A P A Dev. Inc

Date 8-30-97

(This space for Federal or State office use)

Approved by /S/ Duane W. Spencer

Title \_\_\_\_\_

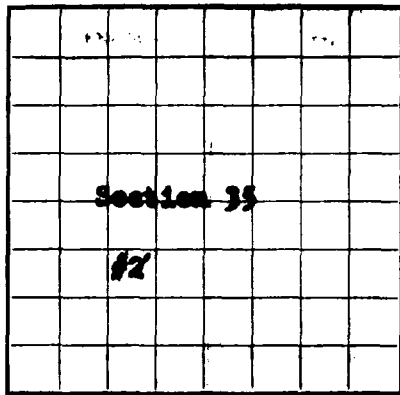
Date SEP 15 1997

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 Instruction on Reverse Side

NMOn



LOCATE WELL CORRECTLY

U. S. LAND OFFICE ~~Window Rock~~  
SERIAL NUMBER ~~14-20-600-9540~~  
LEASE OR PERMIT TO PROSPECT  
**Navajo "P"**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## LOG OF OIL OR GAS WELL

Company Skelly Oil Company Address Box 38 - Hobbs, New Mexico  
Lessor or Tract Navajo "P" Field Undesignated State New Mexico  
Well No. 2 Sec. 35 T 32-N R 17-W Meridian N.M.P.M. County San Juan  
Location 1920 ft.  $\left\{ \begin{smallmatrix} N \\ S \end{smallmatrix} \right\}$  of 8 Line and 1810 ft.  $\left\{ \begin{smallmatrix} E \\ W \end{smallmatrix} \right\}$  of W Line of Section 35 Elevation 5720 ft.  
(Derive floor relative to sea level)  
The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.  
Signed (ORIGINAL) H. E. Aab

Date May 28, 1963 Title Dist. Sept.

The summary on this page is for the condition of the well at above date.

Commenced drilling May 10, 1963 Finished drilling May 13, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1596 to 1605 No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
7-5/8"	26.5	8	33	33'	Ball	Surface	Surface	Surface	Drilling
4-1/2"	16.5	8	33	33'	Ball	Surface	Surface	Surface	Drilling
HISTORY OF OIL OR GAS WELL									

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8"	34'	10	By Hand	—	—
4-1/2"	165'	150	Pump & Plug	—	—

ILLEGIBLE

Adapters—Material

Size

## SHOOTING RECORD

Shot	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" casing perfor. 1596-1603' with 29,000 gallons of lease oil and 30,000 20/40 sand.						

## TOOLS USED

Rotary tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet.  
 Cable tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet.

## DATES

\_\_\_\_\_, 19\_\_\_\_ Put to producing \_\_\_\_\_, 19\_\_\_\_  
 The production for the first 24 hours was \_\_\_\_\_ barrels of fluid of which <sup>May 22</sup> 99.9% was oil; 0% emulsion; 0% water; and .1% sediment. Gravity, °Bé. 41.7  
 If gas well, cu. ft. per 24 hours \_\_\_\_\_ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_  
 Rock pressure, lbs. per sq. in. \_\_\_\_\_

## EMPLOYEES

\_\_\_\_\_, Driller \_\_\_\_\_, Driller  
 Johnston \_\_\_\_\_, Driller  
 Oden \_\_\_\_\_, Driller

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	143	143	Sand and shale
143	1264	1121	Sand and shale - Top Mancos - 143'
1264	1490	186	Sand and shale - Top Middle Gallup - 1264'
1490	1596	146	Sand and shale - Top Lower Gallup - 1490'
1596	1617	21	Sand and shale - Top Tecito Sand - 1596'
1617	1660	43	Sand and shale - Top Sonstee - 1617'
	1660	Total Depth	
	1640	Plugged Back Total Depth	
			Geological Tops by Schlumberger Induction - Gamma Ray Log.

Core No. 1 - 1593' - 1613' - (20') - Recovered 20'

Top - 3' - Shale  
 Next - 9' - Gray sand saturated with oil  
 Next - 8' - Shale

ILLEGIBLE

FROM—	TO—	TOTAL FEET	FORMATION
-------	-----	------------	-----------

FORMATION RECORD—Continued

16-43004-5

NO. OF COPIES RECEIVED		1
DISTRIBUTION		
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		4
PROGRATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

Operator  
Getty Oil Company  
Address  
Box 3360, Casper, Wyoming 82602

Reason(s) for filing (Check proper box)  
New Well ☐ Change In Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change In Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 2	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. State, Federal or Fee 14-200-600-3540
Location Unit Letter K ; 1810 Feet From The West Line and 1920 Feet From The South Line of Section 35 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1588, Farminston, NM			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Pge. 17W
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.
Date Spudded	Date Compl. Ready to Prod.	Total Depth			F.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay			Testing 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 10% allowable for this depth or be for full 24 hours)

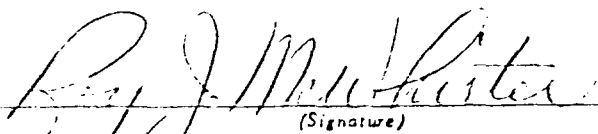
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (Flow, Back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

I. CERTIFICATE OF COMPLIANCE

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

  
(Signature)

Area Superintendent  
(Title)

2/4/77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 15 1977, 19

ORIGINAL SIGNED BY N. E. MAXWELL, JR.

TITLE PETROLEUM ENGINEER DIST. NO. 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	3
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 2	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-8540
Location Unit Letter <u>K</u> ; <u>1810</u> Feet From The <u>West</u> Line and <u>1920</u> Feet From The <u>South</u>				
Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, NM 87401			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W
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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Shesley  
(Signature)  
CO operator  
(Title)  
Sept 11, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19\_\_\_\_  
Original Signed by A. R. Kendrick  
BY \_\_\_\_\_  
TITLE SUPERVISOR DISTRICT # 8

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

Operator

WTR OIL COMPANY

Address

Drawer LL, Cortez, Colorado 81321

Reason(s) for filing (Check proper box)

New Well

☐

Change in Transporter of:

Recompletion

☐

Oil

☒

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "p"	Well No. 2	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal State, Federal or Fee 14-20-600	Lease No. 3540
Location Unit Letter <u>K</u> ; <u>1810</u> Feet From The <u>West</u> Line and <u>1920</u> Feet From The <u>South</u> Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, New Mexico 87413			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Pge. 17W
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'y.	Diff. Res'y.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, CR, 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pistol, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Lee E. Secary  
(Signature)

Office Manager

8-24-82  
(Date)

OIL CONSERVATION COMMISSION

AUG 25 1982

APPROVED \_\_\_\_\_, 19

Original Signed by FRANK T. CHAVEZ

BY

SUPERVISOR DISTRICT # 3

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator BayStar Petroleum Corporation	
Address P. O. Box 2975, Corpus Christi, Texas 78403	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Nava jo "P"	Well No. 2	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location Unit Letter K ; 1810 Feet From The West Line and 1920 Feet From The South				
Line of Section 35 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1887, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, CR, 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 2, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 06 1985  
BY Frank J. [Signature]  
TITLE SUPERVISOR DISTRICT # 30

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED  
OCT 17 1988  
Form O-104  
Revised 10-01-78  
Original 09-01-83  
Page 1  
OIL CONSERVATION DIV.  
DIST. 3

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
A.P.A. Development Corporation  
Address  
P.O. Box 215, Cortez, Colorado 81321  
Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☒ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Casinthead Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 2	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Navajo State, Federal or Fee 14-20-600-3540	Lease No.
Location Unit Letter K : 1810 Feet From The West Line and 1920 Feet From The South Line of Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinthead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
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:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Pete F. Woolley  
(Signature)  
Operator  
(Title)  
10-12-88  
(Date)

OIL CONSERVATION DIVISION

OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Brian J. Chant  
TITLE SUPERVISION DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms 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**

I.

Operator A.P.A. Development Inc.	Well API No.
Address P.O. Box 215, Cortez, CO 81321	
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 checked="" 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 Navajo "P"	Well No. 2	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Nava jo State, Federal or Fee 14	Lease No. -20-600-3540
Location Unit Letter K : 1810 Feet From The West Line and 1920 Feet From The South Line Section 35 Township 32N Range 17W, NMPM, San Juan County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Tw. 32N	Rge. 17W	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
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.

Signature Patrick B. Woosley  
Patrick B. Woosley Operator  
Printed Name Title  
8/7/90 (303) 565-2458  
Date Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved AUG 28 1990  
By Barry Shoup  
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

I. Operator A.P.A. Development, Inc.		Well API No. 300451115800S1
Address P.O. Box 215, Cortez, CO 81321		
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 checked="" 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 Navajo "P"	Well No. 2	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-600-3540
Location Unit Letter <u>K</u> : <u>1810</u> Feet From The <u>West</u> Line and <u>1920</u> Feet From The <u>South</u> Line Section <u>35</u> Township <u>32N</u> Range <u>17W</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 checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary-Williams Energy Corporation	Address (Give address to which approved copy of this form is to be sent) 370 - 17th St., Ste 5300, Denver, CO 80202-5653					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.D.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
OIL CON. DIV.			

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

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.

Signature Patrick Woosley Operator  
Printed Name Patrick Woosley  
Date 12/6/93 Telephone No. 303-565-2458

OIL CONSERVATION DIVISION

Date Approved DEC 14 1993

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.



APA Development  
NAVAJO P #3  
O-35-32N 17W  
580S 2215E  
45-11148

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 *APA Development Corp.*  
*% NMOCO*

3. Address and Telephone No.  
*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
*35-32N-17W 58015-2 2215/E*

5. Lease Designation and Serial No.  
*14-20-600-3540*

6. If Indian, Allottee or Tribe Name  
*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
*3 Navajo P*

9. API Well No.  
*30045 11148*

10. Field and Pool, or Exploratory Area

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 \_\_\_\_\_
- ☐ 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.)\*

*See attached plugging procedure.*

SEE ATTACHED PLUG  
CONDITIONS OF APPROVAL

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

Signed *NMOCO Contractor Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by *[Signature]*

Title *PE*

Date *8/17/00*

Conditions of approval, if any:

API NUMBER 30-045-11148 2011-11-01 1:25  
 OPERATOR NAME APA DEVELOPMENT CORP WELL NUMBER 3  
 PROPERTY NAME NAVAJO P

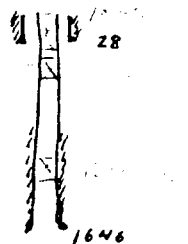
SECTION 35 TOWNSHIP 32N RANGE 17W

FOOTAGE 580 FSL 2215 FEL UL "O"

Sur Csg OD NA HOLE	7 5/8	XX			XX
SUR CSG TD	28	XX			XX
SUR CSG WT	17.7	XX			XX
TOP OF CMT	0	XX			XX
ACTUAL		XX			XX
CACULATED	10SX	XX			XX
PROD CSG OD 6 1/4	4 1/2	XX			XX
PROD CSG TD	1646	XX			XX
PROD CSG WT	9.5	XX			XX
TOP OF CMT	791	XX	XX	XX	XX
FORMATION TOP ACTUAL	EST	XX		XX	
GALLUP1243 CACULATED	100SX	XX		XX	
MANCOS 130 PERF TOP	1586	XX		XX	
PERF BOTTOM	1596	XX		XX	
PACKER		XX		XX	
TYPE OF PLUG		XX		XX	
CIBP & CMT		XX		XX	
CMT		XX		XX	

### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOO H W/TUBING, PICKUP WORK STRING, CIRC HOLE  
 SPOT 14 SX PLUG @ 1293-1143 WOC TAG, FILL AS REQUIRED  
 PERF @ 180' PUMP 32 SX PLUG 180-80, 18 IN 14 OUT, IF CIRC BRING TO SURF  
 PERF AT 78' CIRC CEMENT TO SURFACE, EST 20 SX  
 CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS,  
 Close pits according to guidelines: Clean and level location



IN REPLY REFER TO:  
(07337)

**UNITED STATES DEPARTMENT OF THE INTERIOR**

**BUREAU OF LAND MANAGEMENT  
FARMINGTON DISTRICT OFFICE**

1235 La Plata Highway  
Farmington, New Mexico 87401

Attachment to Notice of

Re: Permanent Abandonment

Intention to Abandon

Well: 3 Navajo #

CONDITIONS OF APPROVAL

1. Plugging operations authorized are subject to the attached "General Requirements for Permanent Abandonment of Wells on Federal and Indian Leases."
2. **Mike Flaniken** with the Farmington Office is to be notified at least 24 hours before the plugging operations commence (505) 599-8907.
3. The following modifications to your plugging program are to be made (when applicable):

Office Hours: 7:45 a.m. to 4:30 p.m.

GENERAL REQUIREMENTS FOR  
PERMANENT ABANDONMENT OF WELLS ON FEDERAL AND INDIAN LEASES  
FARMINGTON DISTRICT OFFICE

1.0 The approved plugging plans may contain variances from the following minimum general requirements.

1.1 Modification of the approved plugging procedure is allowed only with the prior approval of the Farmington District office, *Branch of Drilling & Production*.

1.2 Requirements may be added to address specific well conditions.

2.0 Materials used must be accurately measured.

3.0 A tank or approved pit must be used for containment of any fluids from the wellbore during plugging operations and all unattended pits are to be fenced with woven wire. These pits will be fenced on three sides and once the rig leaves location, the fourth side will be fenced.

3.1 Pits are not to be used for disposal of any constituent(s) of concern.

4.0 All cement plugs are to be placed through a work string. Cement may be bull-headed down the casing with prior approval. Cement caps on top of bridge plugs or cement retainers may be placed by dump bailer.

4.1 The cement shall be as specified in the approved plugging plan.

4.2 All cement plugs placed inside casing shall have sufficient volume to fill a minimum of 100' of the casing, *or annular void(s) between casings*, plus an excess volume sufficient to provide for 50 linear feet of fill above the plug.

4.3 Surface plugs may be no less than 50' in length.

4.4 All cement plugs placed to fill annular void(s) between casing and the formation shall be of sufficient volume to fill a minimum of 100' of the annular space plus 100% excess, *calculated using the bit size, or 100' of annular capacity, determined from a caliper log*, plus an excess volume sufficient to provide for 50 linear feet of fill above the plug.

4.5 All cement plugs placed to fill an open hole shall be of sufficient volume to fill a minimum of 100' of hole, *as calculated from a caliper log*, plus an excess volume sufficient to provide for 50 linear feet of fill above the plug. In the absence of a caliper log, an excess of 100% shall be required.

5.0 All cement plugs spotted across, *or above*, any exposed zone(s), when; the wellbore is not full of fluid or the fluid level will not remain static, *and in the case of lost circulation or partial returns during cement placement*, shall be tested by: (1) tagging with the work string, or: (2) *for cased holes only*; pressuring to a minimum surface pressure of 500 PSI, with no more than a 10% drop during a 15-minute period.

5.1 The top of any cement plug verified by tagging must be at or above the depth specified in the approved plan, *without regard to any excess*.



5.2 Testing will not be required for any cement plug that is mechanically contained by use of a bridge plug and/or cement retainer.

5.3 Any cement plug which is the only isolating medium, *for a fresh water interval or a zone containing a prospectively valuable deposit of minerals*, shall be tested by tagging.

6.0 All wells are to be controlled by means of a wellbore fluid that is to be of a weight and consistency necessary to stabilize the wellbore. Wellbore fluid shall be left in place as filler between all plugs.

6.1 Drilling mud may be used as the wellbore fluid in open hole plugging operations.

6.2 The wellbore fluid used in cased holes shall be of sufficient weight to balance known pore pressures in all exposed formations.

7.0 A blowout preventer and related equipment (BOPE) shall be installed and tested prior to working in a wellbore with any exposed zone(s); (1) that are over pressured, (2) where the pressures are unknown, or (3) known to contain H<sub>2</sub>S.

8.0 Within 30 days after plugging work is completed, file a Sundry Notice, *Subsequent Report of Abandonment (Form 3160-5)*, five copies, with the District Manager, Bureau of Land Management, 1235 La Plata Highway, Farmington, NM 87401. The report should show the manner in which the plugging work was carried out, the extent, *by depth(s)*, of cement plugs placed, and the size and location, *by depth(s)*, of casing left in the well. Show date well was plugged.

9.0 All permanently abandoned wells are to be marked with a permanent monument as specified in 43 CFR 3162.6(d). Unless otherwise approved.

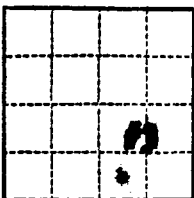
All of the above are minimum requirements. Failure to comply with the above conditions of approval may result in an assessment for noncompliance and/or a Shut-in Order being issued pursuant to 43 CFR 3163.1. You are further advised that any instructions, orders or decisions issued by the Bureau of Land Management are subject to administrative review pursuant to 43 CFR 3165.3 and appeal pursuant to 43 CFR 3165.4 and 43 CFR 4.700.

(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_  
Navajo - Navajo  
Allottee Mountain Tribal  
Lease No. 24-22-100-310

B



SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

RECEIVED  
MAY 17 1963  
U. S. GEOLOGICAL SURVEY  
ALBUQUERQUE, NEW MEXICO

Well No. 3 is located 500 ft. from NE line and 2215 ft. from E line of sec. 35  
Sec. 35 (4 Sec. and Sec. No.) SW (Twp.) 1W (Range) 10N (Meridian)  
Unincorporated Gallup (Field) San Juan (County or Subdivision) New Mexico (State or Territory)

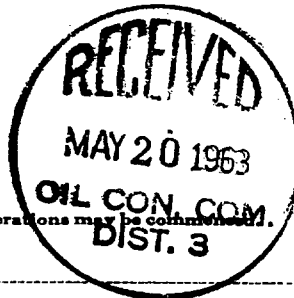
The elevation of the derrick floor above sea level is 5702 ft. (est.)

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 3 to around 1635' to test Galling formation.  
Our casing program is as follows:  
20' - 7-5/8" OD 17.7 lb spiral weld casing - to be cemented with 10 sacks regular cement.  
1635' - 4-1/2" OD 9.3 lb 2-35 casing - to be cemented with 75 sacks regular cement w/4% gel and 25% gilsonite and 25 sacks regular w/2% calcium chloride.

ILLEGIBLE



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SHELLY OIL COMPANY

Address BOX 30

HONES, NEW MEXICO

By L. A. Strickling, Jr.

Title Area Foreman

# NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

### SECTION A.

Date May 17, 1963

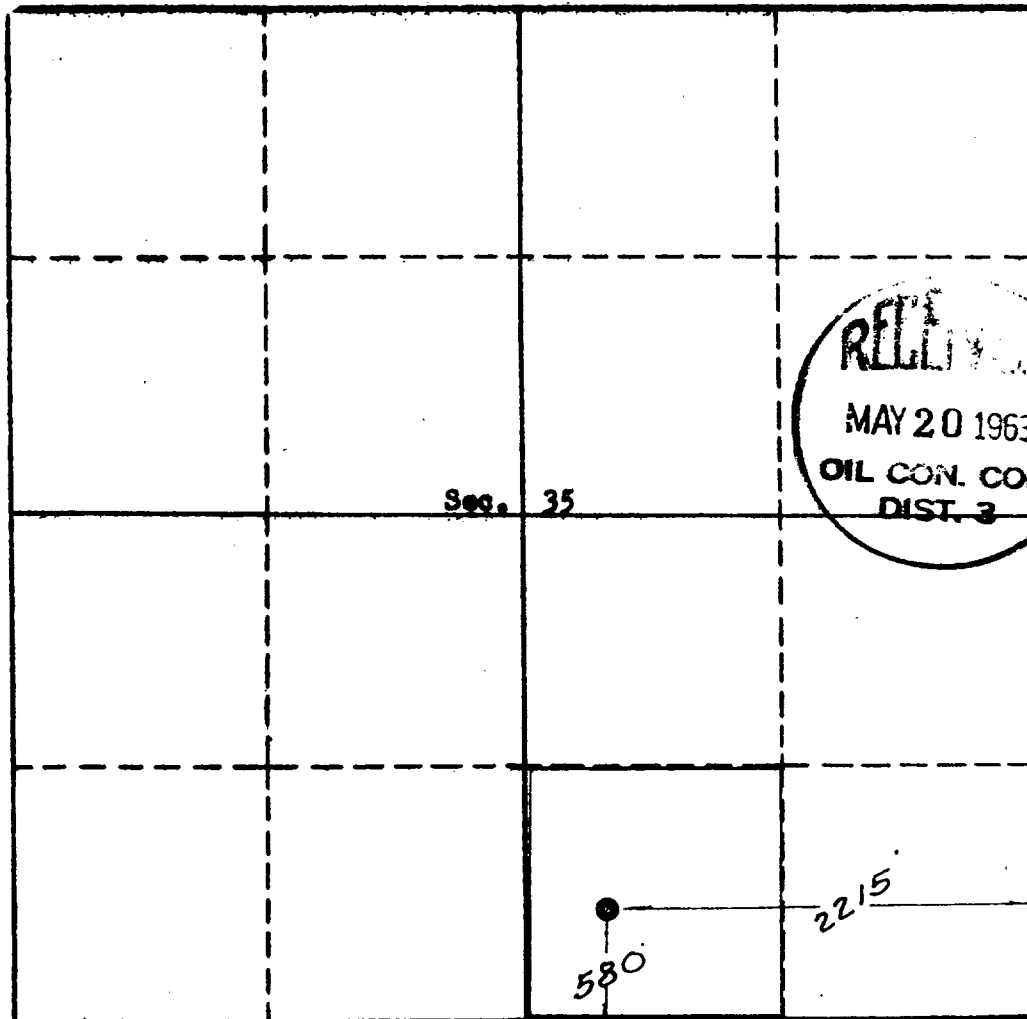
Operator Skelly Oil Company Lease Navajo "P"  
Well No. 3 Unit Letter 0 Section 35 Township 32 North Range 17 West NMPM  
Located 580 Feet From South Line, 2215 Feet From East Line  
County San Juan G. L. Elevation 5702 Dedicated Acreage 40 Acres  
Name of Producing Formation Gallup Pool Undesignated Gallup

1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_. If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

### SECTION B.



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY

(OPERATOR)

E. A. Strickling, Jr.  
(REPRESENTATIVE)

Box 38, Hobbs, New Mexico

(ADDRESS)



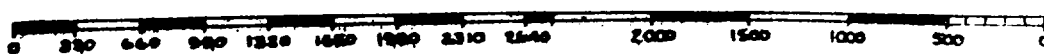
STATE OF NEW MEXICO  
I, E. V. ECHORAWK, do hereby certify that the well location shown on the plat in Section B was plotted from field notes of actual surveys made by me or under my supervision and that the same are true and correct to the best of my knowledge and belief.

Date Surveyed May 16, 1963

Four States Engineering Co.  
FARMINGTON, NEW MEXICO

Emmett H. Echorawk  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency .....  
Navajo - Nte .....  
Allottee Mountain Tribal .....  
Lease No. 14-22-600-3540

	Sec. 35	

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	XX
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	Perforating & Treating	XX

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

ILLEGIBLE

June 11, 1963

Navajo "P"  
Well No. 2 is located 999 ft. from [S] line and 221.5 ft. from [E] line of sec. 35  
SW/4 SE/4 Sec. 35 32-N 17-W N10W  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Undesignated Gallup San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

RECEIVED

JUN 14 1963

The elevation of the derrick floor above sea level is 5702 ft.

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Well spudded May 20, 1963. Set 7-5/8" OD casing at 28' and cemented with 10 sacks of cement by hand, W.O.C. Drilled to 1582'.

Core No. 1 - 1582 - 1601' - Recovered 19'

Top - 6' - Shale

Next - 12' - Sand saturated with oil

Next - 1' - Shale

Reached total depth of 1630' on May 23, 1963. Set 4-1/2" OD casing at 1646' and cemented with 100 sacks of cement, W.O.C. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1630', FSTD 1630'. Perforated 4-1/2" OD casing from 1586 - 1596' for a total of 10 feet and 40 holes. Treated through 4-1/2" OD casing perfora. 1586 - 1596' with 28,604 gallons of lease oil and 30,000# 20/40 sand. After recovering all lead oil well pumped 164 barrels of oil in 24 hours.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Skelly Oil Company

Address Box 38

Hobbs, New Mexico

(ORIGINAL) H. E. Aab

By

Title Dist. Supt.

DEVIATION AFFIDAVIT

Date June 7, 1963

New Mexico Oil Conservation Commission

1000 Rio Brases Road

Astec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

ILLEGIBLE

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of May 19 63, Scott Bros. Drilling Company ran the following surveys for Skelly Oil Company on their Navya lease, Well No. 3, in SW 1/4 of SE 1/4 of Sec. 35-28-17N NMPM, Undesignated Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
500'	1/2		
1000'	1-1/4		
1500'	1-1/2		

Subscribed and sworn to before me this 7th day of June 19 63

Jose W. Thompson  
Notary Public in and for said County and State

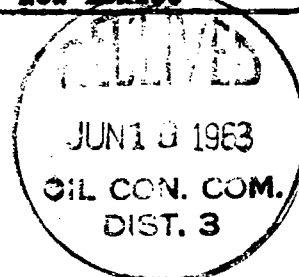
My Commission expires: 3-16-67

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

Name J. W. George

Assistant District Superintendent  
Position

Box 38, Hobbs, New Mexico  
Address



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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo "P"</b>		Well No. <b>3</b>	
Unit Letter <b>0</b>	Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Undesignated Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal-Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>0</b>	Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>McWood Corporation</b>				Address (give address to which approved copy of this form is to be sent)  <b>330 Petroleum Bldg., Abilene, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas Vented - Waiting for gas connection**

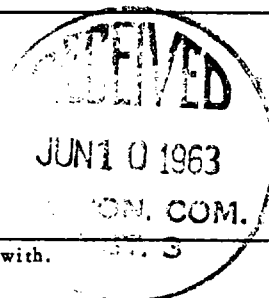
**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 7th day of June, 19 63.

**OIL CONSERVATION COMMISSION**

Approved by

Original Signed By  
**A. R. KENDRICK**

By

Title

**Assistant District Superintendent**

Title

**PETROLEUM ENGINEER DIST. NO. 3**

Date

**JUN 10 1963**

Address

**SHelly OIL COMPANY**

**Box 38, Hobbs, New Mexico**

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PRODUCTION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - ~~WELL~~ AT LOWABLE ILLEGIBLE

New Well  
~~RECEIVED~~

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farlington, New Mexico  
(Place)

June 7, 1963  
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Shelly Oil Company  
(Company or Operator)

Navajo "P"

(Lease)

Well No. 3, in SW  $\frac{1}{4}$  SE  $\frac{1}{4}$ ,

Sec. 35, T. 32N, R. 17W, NMPM, Undesignated Gallup Pool

San Juan

County. Date Spudded 5-20-63

Date Drilling Completed 5-23-63

Please indicate location:

Elevation 5702' GL Total Depth 1650' PBDT 1630'

Top Oil/Gas Pay 1586' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1586-1596'

Open Hole \_\_\_\_\_ Depth \_\_\_\_\_ Casing Shoe 1646' Depth \_\_\_\_\_ Tubing 1590'

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 164 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size \_\_\_\_\_ Choke

GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated w/28,604 gals. lease oil & 30,000# sand.

Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
Press. \_\_\_\_\_ Press. \_\_\_\_\_ oil run to tanks June 3, 1963

Oil Transporter McWood Corporation

Gas Transporter \_\_\_\_\_

Remarks: Well pumped 164 barrels in 24 hours.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUN 10 1963, 19

SKELLY OIL COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION  
Original Signed By

By: A. R. KENDRICK

Title \_\_\_\_\_

By: J. W. George  
(Signature)

Title Assistant District Superintendent

Send Communications regarding well to:

Name Shelly Oil Company

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TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*B.T.*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #7</b>		Well No. <b>3</b>	
Unit Letter <b>0</b>	Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>0</b>	Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1560, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection.**

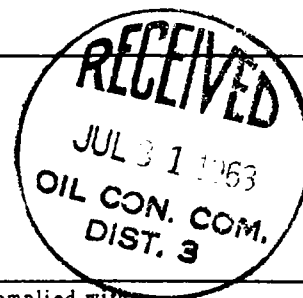
**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☒ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

**ILLEGIBLE**

Remarks

**Oil transporter to be changed effective August 1, 1963.**



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with:

Executed this the 31 day of July, 19 63.

**OIL CONSERVATION COMMISSION**

Approved by  
 Original Signed By  
**A. R. KENDRICK**

Title  
**PETROLEUM ENGINEER DIST. NO. 3**

Date  
**JUL 31 1963**

By  
*J. W. George*  
 Title  
**Assistant District Superintendent**  
 Company  
**Shelly Oil Company**  
 Address  
**Box 720, Hobbs, New Mexico**



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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator **Skelly Oil Company** Lease **Navajo #2** Well No. **9**

Unit Letter **non** Section **33** Township **32-N** Range **17-W** County **San Juan**

Pool **Many Rocks Gallup** Kind of Lease (State, Fed, Fee) **Federal**

If well produces oil or condensate give location of tanks Unit Letter **non** Section **34** Township **32-N** Range **17-W**

Authorized transporter of oil ☒ or condensate ☐ Address (give address to which approved copy of this form is to be sent)  
**Shell Oil Company** **Box 1588 - Farmington, New Mexico**

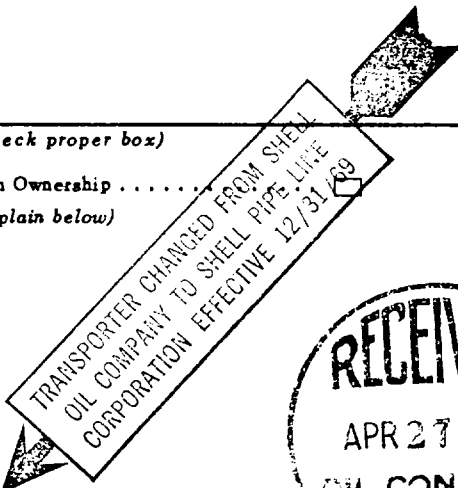
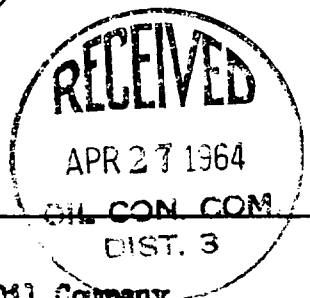
Is Gas Actually Connected? Yes ☐ No ☒

Authorized transporter of casing head gas ☐ or dry gas ☐ Date Connected Address (give address to which approved copy of this form is to be sent)  
**None**

If gas is not being sold, give reasons and also explain its present disposition:  
**Waiting on gas connection - Gas being vented.**

**REASON(S) FOR FILING (please check proper box)**

New Well ☐ Change in Ownership ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ☒ Dry Gas ☐  
 Casing head gas ☐ Condensate ☐

Remarks  
**Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.  
 Executed this the **24th** day of **April**, 19 **64**

<b>OIL CONSERVATION COMMISSION</b>	By <b>Charles J. Love</b>
Approved by <b>Original Signed Emery C. Arnold</b>	Title <b>Dist. Engineer</b>
Title <b>Supervisor Dist. # 3</b>	Company <b>Skelly Oil Company</b>
Date <b>APR 27 1964</b>	Address <b>Box 730 - Hobbs, New Mexico</b>

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LAND OFFICE	
OPERATOR	1

# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease  
Federal ☒ Indian ☐ Fee ☐

5. State Oil & Gas Lease No.  
Fed. Contr. #14-20-600-3540

## 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Skelly Oil Company	8. Farm or Lease Name Navajo "P"
3. Address of Operator 330 So. Center-Rm 208, Casper, WY 82601	9. Well No. 3
4. Location of Well UNIT LETTER <u>0</u> , <u>2215</u> FEET FROM THE <u>E</u> LINE AND <u>580</u> FEET FROM THE <u>S</u> LINE, SECTION <u>35</u> TOWNSHIP <u>32N</u> RANGE <u>17W</u> N.M.P.M.	10. Field and Pool, or Wildcat Many Rocks-Gallup
15. Elevation (Show whether DF, RT, GR, etc.) 5707 DF	12. County San Juan

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ 11/1/70  
TEMPORARILY ABANDON ☒  
PULL OR ALTER CASING ☐  
OTHER ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

This well is no longer economically productive and is under study for improvement of its productive capacity.

Permission is requested for continuation of TA status for at least one year.

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

SIGNED [Signature] TITLE Area Superintendent DATE 10/30/70

Original Signed by Henry C. Arnold

APPROVED BY [Signature] TITLE SUPERVISOR DIST. #3 DATE 11/1/70

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE  
(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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. 14-20-600-3540
2. NAME OF OPERATOR BayStar Petroleum Corporation	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR P.O. BOX 2975 Corpus Christi, Texas 78403	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 550' fs / 2215' fe	8. FARM OR LEASE NAME Navajo P
	9. WELL NO. 3
	10. FIELD AND POOL, OR WILDCAT Many Rocks - Gallup
	11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec 35 - T32N - R17W
14. PERMIT NO.	15. ELEVATIONS (Show whether DP, M, or R) FARMINGTON RESOURCE AREA KB 5708'
	12. COUNTY OR PARISH San Juan
	13. STATE N.M.

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☒  
REPAIR WELL ☐  
(Other) ☐

PULL OR ALTER CASING ☐  
MULTIPLE COMPLETION ☐  
ABANDONMENT ☐  
CHANGE PLANS ☐

WATER SHUT-OFF ☐  
FRACTURE TREATMENT ☐  
SHOOTING OR ACIDIZING ☐  
(Other) ☐

REPAIRING WELL ☐  
ALTERING CASING ☐  
ABANDONMENT ☐

(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 pertinent to this work.)

BayStar Petroleum Corp. is currently in an acidizing program of all the wells on the Navajo M+P Leases. The P#3 has been scheduled for an acid job in the first of November, 1985. Because of continual evaluation and the lesser potential expected in this well it has been scheduled near the end of the program. The acid job will consist of 3 barrels water mixed with 1 barrel of Turflow chemical and displaced into the formation with 4 barrels of water. The acid will be left in over night and swabbed dry the following day. The well will then be put on production if successful.

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

SIGNED

TITLE

Geologist

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED  
DATE 7/11/85

DATE 7/11/85

MANAGER  
FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. 14-20-600-3540
2. NAME OF OPERATOR BayStar Petroleum Corporation	6. INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR P.O. Box 7397 ALB. N.M. 87194	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface SW/4SE/4 Sec 35, T.32N., R.17W	8. FARM OR LEASE NAME Navajo P
14. PERMIT NO.	9. WELL NO. 3
15. ELEVATIONS (Show whether at surface, etc.)	10. FIELD AND POOL, OR WILDCAT Many Rocks
BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 35-32N-17W
	12. COUNTY OR PARISH San Juan
	13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANE

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(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 pertinent to this work.)

Well was not acidized. There are no plans to acidize.

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

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

MAR 04 1987

FARMINGTON RESOURCE AREA

BY SM

\*See Instructions on Reverse Side

NMOCC

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	
PROMOTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
**A.P.A. Development Corporation**

Address  
**P.O. Box 215, Cortez, Colorado 81321**

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

**OIL CON. DIV.**  
**DIST. 3**

If change of ownership give name and address of previous owner **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "P"</b>	Well No. <b>3</b>	Pool Name, including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Navajo</b> State, Federal or Fee <b>14-20-600-3540</b>	Lease No.
Location Unit Letter <b>0</b> : <b>580</b> Feet From The <b>South</b> Line and <b>2215</b> Feet From The <b>East</b> Line of Section <b>35</b> Township <b>32N</b> Range <b>17W</b> NMPM. <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Ciniza Pipe Line, Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1887, Bloomfield, NM 87413</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit : <b>C</b> Sec. : <b>34</b> Twp. : <b>32N</b> Rge. : <b>17W</b>
Is gas actually connected?	When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Patricia B. Woolley*  
(Signature)  
*Operator*  
(Title)  
*10-12-88*  
(Date)

OIL CONSERVATION DIVISION

APPROVED *[Signature]*, 19  
BY  
TITLE **SUPERVISION DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

November 1981  
Formerly 9-311

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Submit in triplicate  
(Other instructions on reverse side)

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

A.P.A. Development Inc.

3. ADDRESS OF OPERATOR

Box 215 Cortez CO. 81321

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

At surface

580' FSL + 2215 FEL

Sec 35 T32N R17W

14. PERMIT NO.

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

5. LEASE DESIGNATION AND SERIAL NO.

14-20-600-3540

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT ASSIGNMENT NAME

8. FARM OR LEASE NAME

Navajo "P"

9. WELL NO.

#3

10. FIELD AND POOL, OR WILDCAT

Many Rocks Gailup

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

Sec 35 T32N R17W

12. COUNTY OR PARISH 13. STATE

San Juan NM

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

NOTICE OF INTENTION TO

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRAC TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other) T&A

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRAC TREAT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

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

17. DESCRIBE, IN BRIEF, THE 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.)

Plan to Set drillable bridge plug above perfs and pressure test casing

RECEIVED  
MAR 27 1992  
OIL CON. DIV.  
DIST. 3

RECEIVED  
BLM  
92 MAR 17 PM 1:56  
019 FARMINGTON, N.M.

THIS APPROVAL EXPIRES APR 01 1993

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

SIGNED

Pat Wooley

TITLE

DATE

3/13/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

APPROVED

MAR 26 1992

AREA MANAGER

\*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.

NMOOD

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

A.P.A. Development, Inc.

3. Address and Telephone No.

P.O. Box 215, Cortez, CO 81321 303-565-2458

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

S&O' FSL + 2215' FEL  
Sec. 35 T32N R17W

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

NAVAJO

7. If Unit or CA, Agreement Designation

8. Well Name and No.

NAVAJO "P" #3

9. API Well No.

30045111480051

10. Field and Pool, or Exploratory Area

MANY ROCKS FAL.

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 T.A.  
☐ 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.)

Wish to continue T.A. status. Well casing was not tested in 1992, but we are planning to schedule it in 1993.

RECEIVED  
BLM  
93 MAY 19 AM 11:44  
070 FARMINGTON, NM  
MAY 24 1993

THIS APPROVAL EXPIRES APR 01 1994

OIL CON. DIV  
DIST. 3

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

Signed Pat Woolley

Title

Date 5-15-93

(This space for Federal or State office use)

Approved by  
Conditions of approval, if any:

Title

Date

APPROVED

MAY 20 1993

DISTRICT MANAGER

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

NMOCD

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Cont. 14-20-600-3540	
2. NAME OF OPERATOR Skelly Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
3. ADDRESS OF OPERATOR Box 3360, Casper, WY 82601		7. UNIT AGREEMENT NAME Navajo "P"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2215' FEL & 580' FSL		8. FARM OR LEASE NAME Navajo "P"	
14. PERMIT NO.		9. WELL NO. 3	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5707' DF		10. FIELD AND POOL, OR WILDCAT Many Rocks-Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 35-T32N-R17W	
		12. COUNTY OR PARISH San Juan	13. STATE NM

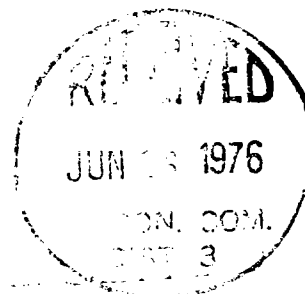
10. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <u>Temporarily Abandon</u> <input checked="" type="checkbox"/>		(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 pertinent to this work.)\*

A study is being made on this lease for possible recompletions in other zones and permission is requested for a continuation of TA status for one more year.

TEMPORARY ABANDONMENT  
EXPIRES JUN 1 1977



JUN 13 1976

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

SIGNED [Signature] TITLE Area Superintendent DATE 6/11/76

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

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

91 OCT 18 AM 11:13  
070 FARMINGTON, NM

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. H-20-600-3540
2. Name of Operator A.P.A. Development, Inc.	6. If Indian, Allottee or Tribe Name Navajo
3. Address and Telephone No. Box 215 Cortez CO 81321	7. If Unit or CA, Agreement Designation Navajo P
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 580' FSL 2215 FEL sec 35 T32N R17W	8. Well Name and No. 3
	9. API Well No. 30045111480051
	10. Field and Pool, or Exploratory Area Many Rocks GA
	11. County or Parish, State San Juan N.M.

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

TYPE OF SUBMISSION

TYPE OF ACTION

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

RECEIVED  
OCT 28 1994  
OIL CON. DIV.

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other

- ☐ 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.)

Plan to plug well as follows:

1. equalize cement plug from 1630' to 1536'
2. pickup to 1535' circulate conditioned fluid to 50' of surface
3. circulate 50' cement plug to surface
4. circulate cement from 50' to surface between 7 5/8" casing and 4 1/2" casing.
5. weld on dry hole marker and remediate surface location.

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

Signed Patricia W. Wadley

Title SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

Date 10/14/94

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

APPROVED

OCT 25 1994

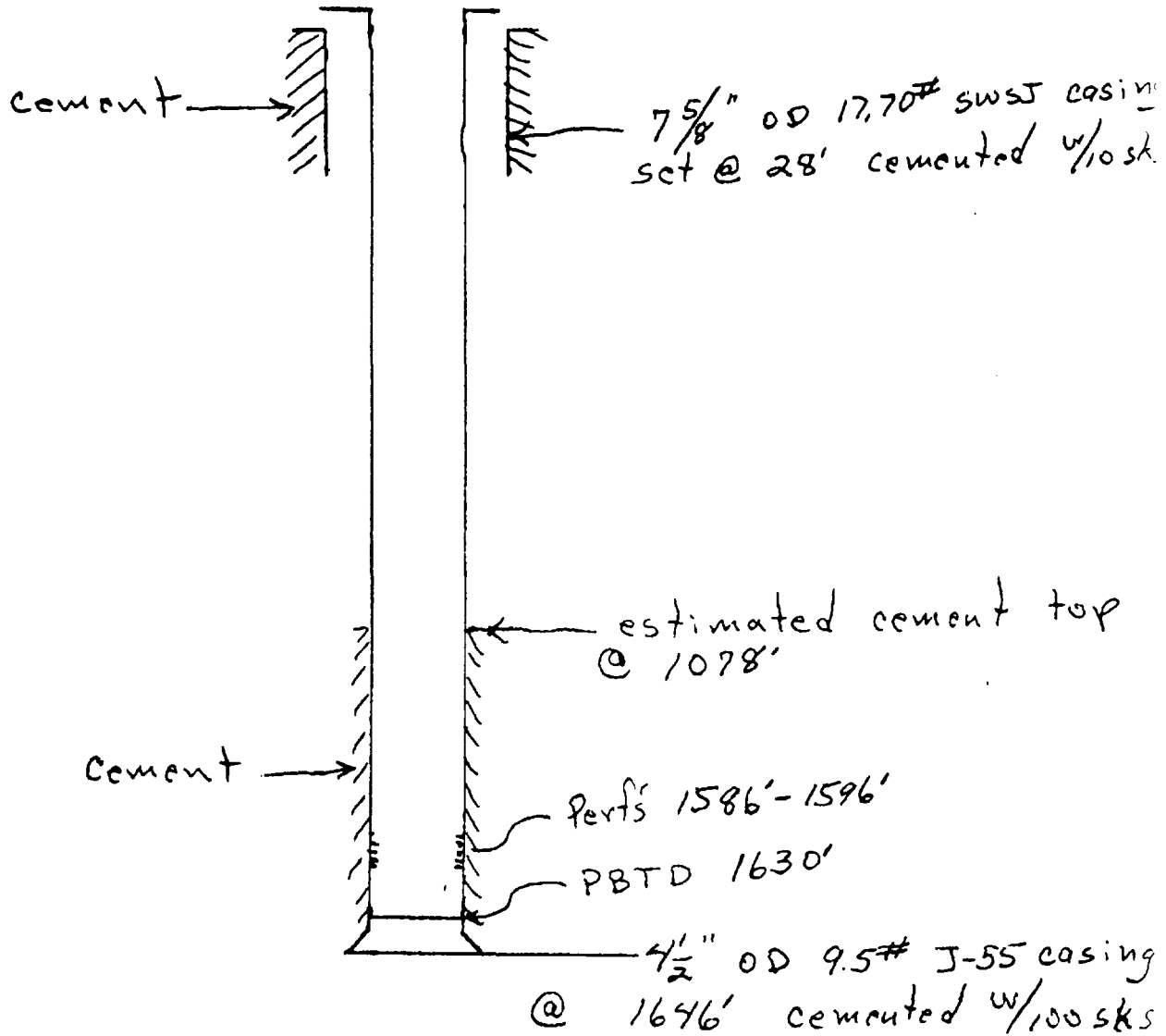
INTERIM MANAGER

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

Navajo Well # P-3

Lease # 14-20-600-3540

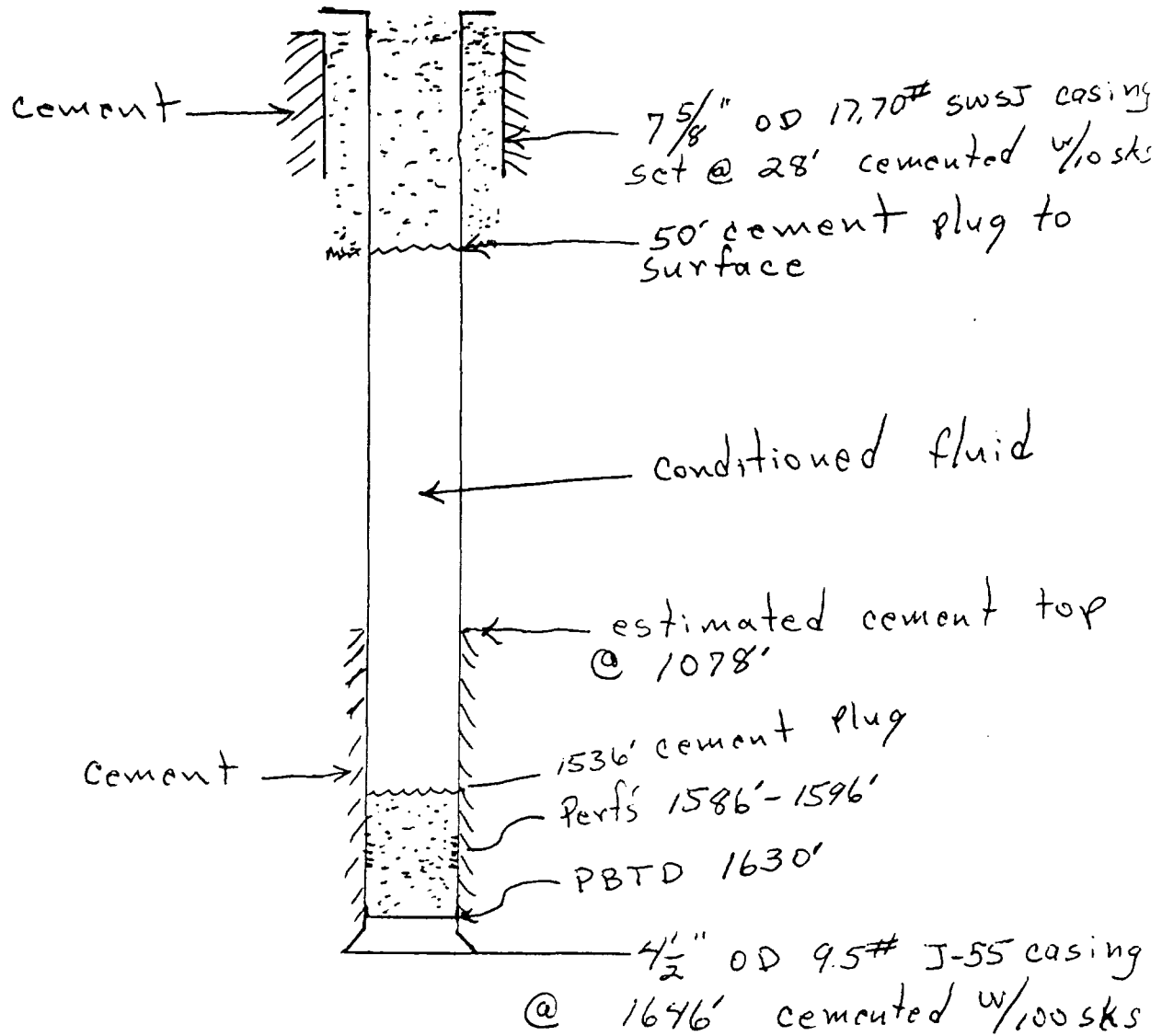
existing Condition



Navajo Well # P-3

Lease # 14-20-600-3540

## Purposed Plan



**UNITED STATES DEPARTMENT OF THE INTERIOR**

**BUREAU OF LAND MANAGEMENT  
FARMINGTON DISTRICT OFFICE**

1235 La Plata Highway  
Farmington, New Mexico 87401

Attachment to Notice of

Re: Permanent Abandonment

Intention to Abandon

Well: **3 Navajo P**

**CONDITIONS OF APPROVAL**

1. Plugging operations authorized are subject to the attached "General Requirements for Permanent Abandonment of Wells on Federal and Indian Leases."

2. **Mike Flaniken** with the Farmington Office is to be notified at least 24 hours before the plugging operations commence (505) 599-8907.

3. The following modifications to your plugging program are to be made (when applicable):

1. **Tag top of cement plug @ 1536'.**

2. Spot a cement plug from 1297' to 1197' inside the casing plus 50 linear feet excess. (top of Gallup @ 1247')

3. Perforate @ 179' and circulate cement to the surface. ( bottom of Point Lookout @ 129')

**Note:** The above modifications are minimum standards. It is acceptable to pump additional cement and combine plugs.

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

5. Lease Designation and Serial No.

14-20 600 3540

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

APA Development

3. Address and Telephone No.

PO Box 1093 Shiprock NM 87420

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

N 63 NAVAJOP 580 FSL 2215 FEL SEC 35  
Lease 14-20 600 3540  
35-T-32N R 17W

8. Well Name and No.

3 NAVAJOP

9. API Well No.

3004511148

10. Field and Pool, or Exploratory Area

MANY ROCKS

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

☐ 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.)\*

N 63 NAVAJOP WILL BE CONVERTED TO INJECTION WELL WITHIN 12 MO

RECEIVED  
N 63 - 3540  
OIL CON. DIV.  
DIST. 3

07 JUN - 2 PM 3:00  
OIL CON. DIV., NM

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

Signed

William E. Boren Title Pres

Date

6-1-97

(This space for Federal or State office use)

Approved by

/S/ Duane W. Spencer

Title

Date

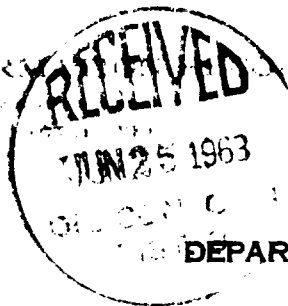
JUN - 4 1997

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 instruction on Reverse Side


LOCATE WELL CORRECTLY



U. S. LAND OFFICE Window Rock  
SERIAL NUMBER 14-30-600-3540  
LEASE OR PERMIT TO PROSPECT \_\_\_\_\_

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

# ILLEGIBLE

## LOG OF OIL OR GAS WELL

Company Shelly Oil Company Address Box 38 - Hobbs, New Mexico  
Lessor or Tract Navajo "P" Field Undesignated Gallup State New Mexico  
Well No. 1 Sec. 35 T. 34N R. 17W Meridian N.M.P.M. County San Juan  
Location 500 ft. N. of 8 Line and 2015 ft. W. of 8 Line of Section 35 Elevation 5702'  
(Derrick floor relative to sea level)  
The information given herewith is a complete and correct record of the well and all work done thereon  
so far as can be determined from all available records.  
Signed (ORIGINAL) H. E. Ash  
Date June 19, 1963 Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

Commenced drilling May 20, 1963 Finished drilling May 23, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1586' to 1596' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
7-5/8"	28	10	By Hand	100					
4-1/2"	16	10	Pump & Plug						

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8"	28'	10	By Hand		
4-1/2"	16'	100	Pump & Plug		

MARK

## PLUGS AND ADAPTERS

Heaving plug—Material ..... Length ..... Depth set .....

Adapters—Material ..... Size .....

## SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" OD casing perfor. 1586-1596' with 28,604 gallons of lease oil and 70,000# 20/40 sand.						

## TOOLS USED

Rotary tools were used from ..... feet to 1650' ..... feet, and from ..... feet to ..... feet

Cable tools were used from ..... feet to ..... feet, and from ..... feet to ..... feet

## DATES

....., 19..... Put to producing June 3, 1949

The production for the first 24 hours was 164 barrels of fluid of which 99.9% was oil; .....% emulsion; .....% water; and .1% sediment. Gravity, °Bé. 41.3°

If gas well, cu. ft. per 24 hours ..... Gallons gasoline per 1,000 cu. ft. of gas .....

Rock pressure, lbs. per sq. in. ....

## EMPLOYEES

Johnston, Driller ..... Driller

Gden, Driller ..... Driller

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	130	130	Sand & Shale
130	1243	1113	Sand & Shale - Top Mancoes - 130'
1243	1435	192	Sand & Shale - Top Middle Gallup - 1243'
1435	1586	151	Sand & Shale - Top Lower Gallup - 1435'
1586	1604	18	Sand & Shale - Top Tugito Sand - 1586'
1604	1650	46	Sand & Shale - Top Sanastee - 1604'
	1650	Total Depth	
	1630	Flug Back Total Depth	
Geological Tops by Schlumberger Induction - Gamma Ray Log.			
Core No. 1 - 1582 - 1604' - Recovered 19'			
Top - 6' - Shale			
Next - 12' - Sand Saturated with Oil			
Next - 1' - Shale			
FROM—	TO—	TOTAL FEET	FORMATION

ILLEGIBLE

FORMATION RECORD—Continued

10-43044-6

NO. OF COPIES RECEIVED	7
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS 4
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-105  
Effective 1-1-65

I. Operator  
Getty Oil Company  
Address  
Box 3360, Casper, Wyoming 82602  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name and address of previous owner  
Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 3	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal State, Federal or Fee 14-20-600-3540	Lease No.
Location Unit Letter O : 580 Feet From The South Line and 2215 Feet From The East Line of Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, NM				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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 Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, CR, 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)

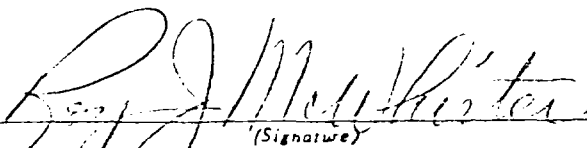
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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

  
(Signature)  
Area Superintendent  
(Title)  
2/4/77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 11 1977, 19  
BY ORIGINAL SIGNED BY N. E. MAXWELL, JR.  
TITLE PETROLEUM ENGINEER NO. 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	3
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 3	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600+3540
Location				
Unit Letter <u>0</u> ; <u>580</u> Feet From The <u>South</u> Line and <u>2215</u> Feet From The <u>East</u>				
Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington N.M. 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Steasley  
(Signature)  
CO-Operator  
(Title)  
9-11-1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19

BY Original Signed by A. R. Kendrick

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-111  
Effective 1-1-65

I. Operator  
WTR OIL COMPANY  
Address  
Drawer LL, Cortez, Colorado 81321  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☒ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Navajo "p" Well No. 3 Pool Name, Including Formation Many Rocks Gallup Kind of Lease Federal Lease No. 14-20-600-3540  
Location  
Unit Letter 0 : 580 Feet From The South Line and 2215 Feet From The East  
Line of Section 35 Township 32N Range 17W NMPM, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)  
Ciniza Pipe Line, Inc. P.O. Box 1887, Bloomfield, New Mexico 87413  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)  
If well produces oil or liquids, give location of tanks. Unit C Sec. 34 Twp. 32N Rge. 17W Is gas actually connected? When

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, CR, 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 Tanks 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/MMCF Gravity of Condensate  
Testing Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size

VI. CERTIFICATE OF COMPLIANCE  
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  
Office Manager  
8-24-82  
OIL CONSERVATION COMMISSION  
APPROVED AUG 25 1982, 19  
BY Original Signed by FRANK T. CHAVEZ  
SUPERVISOR DISTRICT # 3  
TITLE  
This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-85

Operator		BayStar Petroleum Corporation	
Address		P. O. Box 2975, Corpus Christi, Texas 78403	
Reason(s) for filing (Check proper box)		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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Navajo "P"	3	Many Rocks Gallup	Federal	14-20-600-3540
Location				
Unit Letter <u>0</u> : <u>580</u> Feet From The <u>South</u> Line and <u>2215</u> Feet From The <u>East</u>				
Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Ciniza Pipe Line, Inc.	P. O. Box 1887, Bloomfield, NM 87413	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.		
Unit	Sec.	Twp.
C	34	32N
Rge.	17W	
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.
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 Tanks	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/MCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 2, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED Frank J. [Signature] MAY 20 1985  
BY [Signature]  
TITLE SUPERVISOR (DISTRICT # 3)

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
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Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply

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

I.

Operator A.P.A. Development Inc.	Well API No.
Address P.O. Box 215, Cortez, CO 81321	
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 checked="" 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 Navajo "P"	Well No. 3	Pool Name, including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee	Navajo 14-20-600-3540	Lease No.
Location Unit Letter <u>0</u> : <u>580</u> Feet From The <u>South</u> Line and <u>2215</u> Feet From The <u>East</u> Line Section <u>35</u> Township <u>35N</u> Range <u>17W</u> , NMPM, San Juan County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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/MCF	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.

Signature Patrick B. Woosley  
Patrick B. Woosley Operator  
Printed Name Title  
8/7/90 (303) 565-2458  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 28 1990  
By Bill D. Chang  
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.

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 A.P.A. Development, Inc.		Well API No. 300451114800S1
Address P.O. Box 215, Cortez, CO 81321		
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 checked="" 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 Navajo "P"	Well No. 3	Pool Name, including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-600-3540
Location Unit Letter <u>0</u> : <u>580</u> Feet From The <u>South</u> Line and <u>2215</u> Feet From The <u>East</u> Line Section <u>35</u> Township <u>32N</u> Range <u>17W</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 checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary-Williams Energy Corporation	Address (Give address to which approved copy of this form is to be sent) 370 - 17th St., Ste 5300, Denver, CO 80202-5653					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.D.T.D.			
Elevations (D.F., 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 better (all 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 DEC 14 1993
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF OIL CO.

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

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.

Signature Patrick Woosley Operator  
Printed Name Patrick Woosley Title  
12/6/93 303-565-2458  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 14 1993  
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.





APA Development  
NAVAJO P#4.  
L-35-32N 17W.  
1980S 660W  
45-11160

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 *APA Development Corp.*

*% NMOCO*

3. Address and Telephone No.

*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

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

*35 - 32N - 17W 1980/5a 660/W*

5. Lease Designation and Serial No.

*14-20-600-3540*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*4 Navajo P*

9. API Well No.

*30045 11160*

10. Field and Pool, or Exploratory Area

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 \_\_\_\_\_
- ☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOCO Contract Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date *8/17/00*

API NUMBER 30-045-11160

OPERATOR NAME APA DEVELOPMENT CORP WELL NUMBER

4

PROPERTY NAME NAVAJO P

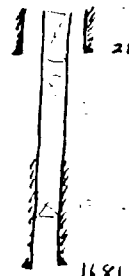
SECTION 35 TOWNSHIP 32N RANGE 17W

FOOTAGE 1980 FSL 660 FWL UL "L"

Sur Csg OD	NA HOLE	7 5/8	XX			XX
SUR CSG TD		28	XX			XX
SUR CSG WT		17.7	XX			XX
TOP OF CMT		0	XX			XX
ACTUAL			XX			XX
CACULATED		10SX	XX			XX
PROD CSG OD	6 1/4	4 1/2	XX			XX
PROD CSG TD		1681	XX			XX
PROD CSG WT		9.5	XX			XX
TOP OF CMT		826	XX	XX	XX	XX
FORMATION TOP	ACTUAL	EST	XX		XX	
GALLUP 1295'	CACULATED	100SX	XX		XX	
MANCOS 165	PERF TOP	1622	XX		XX	
	PERF BOTTOM	1629	XX		XX	
	PACKER		XX		XX	
	TYPE OF PLUG		XX		XX	
	CIBP & CMT		XX		XX	
	CMT		XX		XX	
			XX		XX	

#### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOO H W/RODS & TUBING, PICK UP WORK STRING, CIRC HOLE  
SPOT 14 SX PLUG @1345-1195 WOC TAG, FILL AS REQUIRED,  
PERF @ 218', PUMP 32 SX 218-118, 18 SX OUTSIDE CSG, 14 SX INSIDE CSG  
PERF AT 78' CIRC CEMENT TO SURFACE, EST 17 SX  
CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS  
Close pits according to guidelines: Clean and level location





(SUBMIT IN TRIPLICATE)

Indian Agency

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

Allottee

Lease No.


## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

May 28

19 63

Well No. 4 is located 1900 ft. from N line and 660 ft. from W line of sec. 35

Sec. 35  
(14 Sec. and Sec. No.)  
Designated Gallup  
(Field)

32N 17W  
(Twp.) (Range)  
San Juan  
(County or Subdivision)

MEM  
(Meridian)  
New Mexico  
(State or Territory)

The elevation of the derrick floor above sea level is 5765 ft. (est.)

### DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 4 to around 1664' to test Gallup formation.

Our casing program is as follows:

- 20' - 7-5/8" OD 17.75 Spiral Weld Casing - to be cemented with 10 sacks regular cement.
- 1664' - 4-1/2" OD 9.55 J-55 casing - to be cemented with 75 sacks regular cement w/ 1/2 gal and 25% gilsonite and 25 sacks regular w/ 2% calcium chloride.

ILLEGIBLE

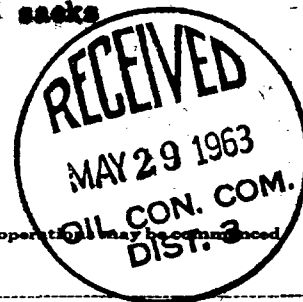
I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced

Company SKELLY OIL COMPANY

Address BOX 34

MOORE, NEW MEXICO

By J. W. George  
Title Asst. Dist. Supt.



# NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

## SECTION A.

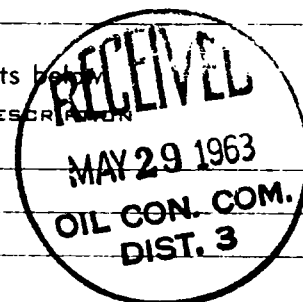
Date May 28, 1963

Operator Skelly Oil Company Lease Navajo "B"  
 Well No. 4 Unit Letter L Section 35 Township 32 North Range 17 West NMPM  
 Located 1980 Feet From South Line, 660 Feet From West Line  
 County San Juan G. L. Elevation 5765 Dedicated Acreage 40 Acres  
 Name of Producing Formation Gallup Pool Undesignated Gallup

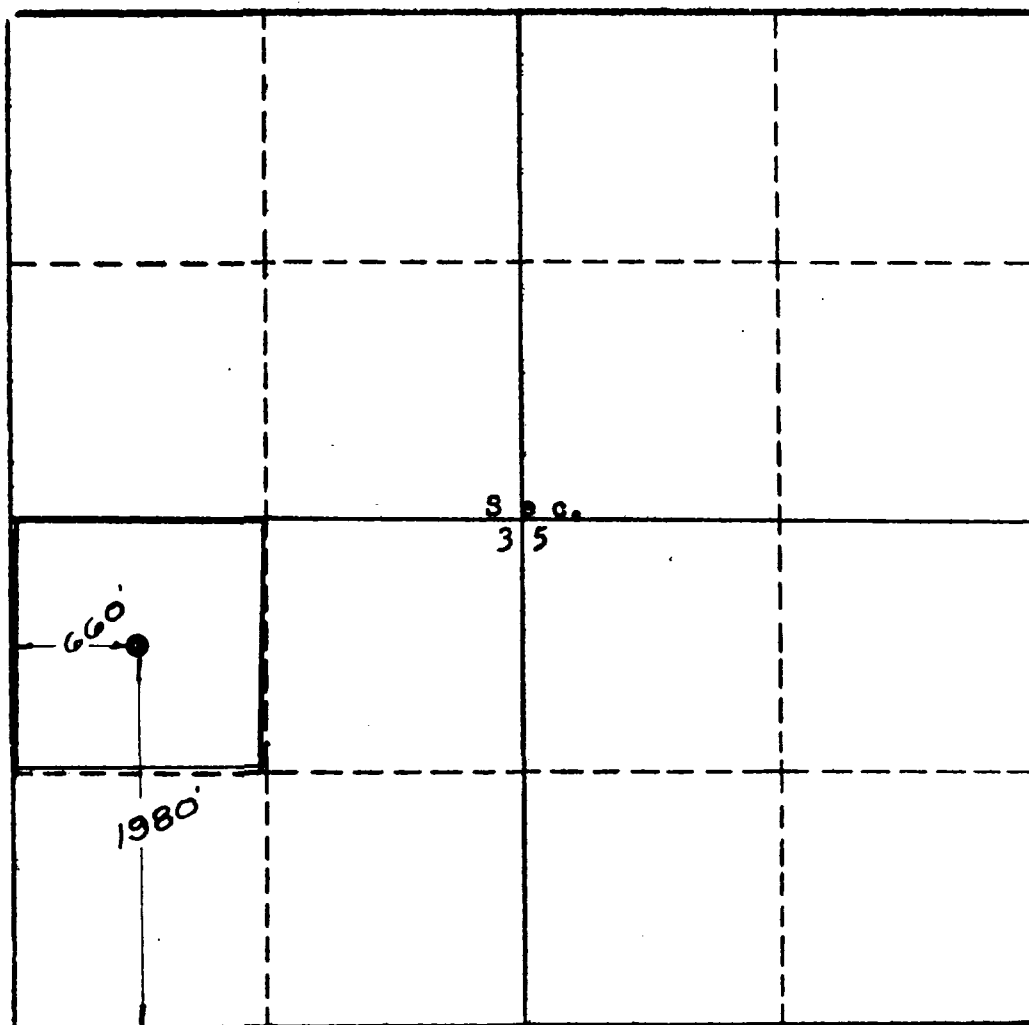
1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_. If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION



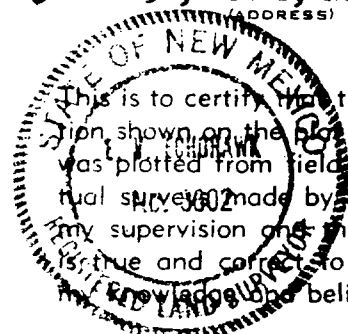
## SECTION B.



\*This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY  
(OPERATOR)

*J. W. George*  
(REPRESENTATIVE)  
Box 38, Hobbs, New Mexico  
(ADDRESS)

Date Surveyed May 16, 1963

Four States Engineering Co.  
FARMINGTON, NEW MEXICO

*Edward H. Caldwell*  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602


(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency Navajo Mts  
Allottee Mountain Tribe  
Lease No. 14-32-400-100

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY
NOTICE OF INTENTION TO ABANDON WELL	<u>Perforating &amp; Treating</u>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

June 19, 1963

Navajo Mts  
Well No. 4 is located 1900 ft. from N line and 640 ft. from W line of sec. 35

1/4 Sec. 35  
(1/4 Sec. and Sec. No.)

12-N  
(Twp.)

17-W  
(Range)

N.M.P.M.  
(Meridian)

Undesignated Gallup  
(Field)

San Juan  
(County or Subdivision)

New Mexico  
(State or Territory)

RECEIVED

The elevation of the derrick floor above sea level is 5770 ft. DF

JUN 24 1963

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Well spudded May 28, 1963. Set 7-1/8" OD casing at 28' & cemented with 10 sacks by hand. W.O.G. Drilled to 1617'.

CORE NO. 1 - 1617' - 1637' - Recovered 20'

Top - 7' - Shale  
Next - 1' - Sandy Shale  
Next - 7' - Sand - Oil Saturated  
Next - 4' - Shale

Reached total depth of 1635' on May 31, 1963. Set 4-1/2" OD casing at 1621' & cemented with 100 sacks. W.O.G. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1646'. FTSB 1646'. Perforated 4-1/2" OD casing from 1623-1629' for a total of 7' & 28 holes. Treated through 4-1/2" OD casing perfs. 1623-1629' with 27,700 gals. Lucas oil & 30,000# 20/40 sand. After recovering all lead oil well pumped 100 bbls. of oil in 24 hrs.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Skelly Oil Company

Address Box 38

Hobbs, New Mexico

ILLEGIBLE

By (ORIGINAL) H. E. Aab

Title Dist. Supt.

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	GAS	
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OPERATOR		2

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #7</b>		Well No. <b>4</b>	
Unit Letter <b>1</b>	Section <b>25</b>	Township <b>20N</b>	Range <b>17W</b>		County <b>San Juan</b>		
Pool <b>Unconsolidated Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>6</b>	Section <b>34</b>	Township <b>20N</b>	Range <b>17W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Midland Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>310 Petroleum Building, Atlanta, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection**

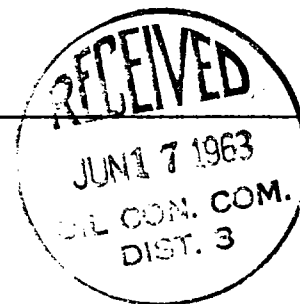
**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **13** day of **June**, 19 **63**.

**OIL CONSERVATION COMMISSION**

Approved by

Original Signed By  
**A. R. KENDRICK**

By

Title

Company

Title

Date

**JUN 17 1963**

Address

**Box 36, Hobbs, New Mexico**

**J. W. George**  
**Assistant District Superintendent**  
**Shelly Oil Company**

NUMBER OF COPIES RECEIVED		5
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PRODUCTION OFFICE		
OPERATOR		2

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*B.T.*

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #7</b>		Well No. <b>4</b>	
Unit Letter <b>L</b>	Section <b>25</b>	Township <b>22N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Unconsolidated Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>G</b>	Section <b>24</b>	Township <b>22N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Midwest Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>330 Petroleum Building, Atlanta, Tenn</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection**

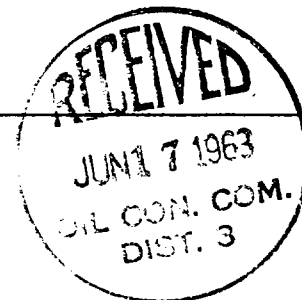
**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒  
 Change in Transporter (check one)  
   Oil ..... ☐ Dry Gas .... ☐  
   Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **13** day of **June**, 19 **63**.

OIL CONSERVATION COMMISSION		By
Approved by	Original Signed By <b>A. R. KENDRICK</b>	<i>J. W. George</i>
Title		<b>Assistant District Superintendent</b>
		<b>Shelly Oil Company</b>
Date	<b>JUN 17 1963</b>	Address <b>Box 38, Hobbs, New Mexico</b>

NUMBER OF COPIES RECEIVED		4	
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TRANSPORTER	OIL		
	GAS		
PRODUCTION OFFICE			
OPERATOR			

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - ~~ALLOWABLE~~ ALLOWABLE ILLEGIBLE

New Well  
~~RECEIVED~~

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico

June 13, 1963

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Shelly Oil Company

Navajo #2

, Well No. 4, in SW  $\frac{1}{4}$  SW  $\frac{1}{4}$ ,

(Company or Operator)

(Lease)

1, Sec. 35, T. 38N, R. 17W, NMPM, Undesignated Gallup Pool

Unit Letter

San Juan

County. Date Spudded 2-28-63

Date Drilling Completed 5-31-63

Please indicate location:

Elevation 9765' GS 9771' MS Total Depth 1603' PBDT 1606'

Top Oil/Gas Pay 1602' Name of Prod. Form. Gallup

### PRODUCING INTERVAL -

Perforations 1602-1603'

Open Hole --- Depth --- Casing Shoe 1601' Depth Tubing 1614'

### OIL WELL TEST -

Natural Prod. Test: --- bbls. oil, --- bbls water in --- hrs, --- min. Size ---

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 106 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size ---

### GAS WELL TEST -

Natural Prod. Test: --- MCF/Day; Hours flowed --- Choke Size ---

Method of Testing (pitot, back pressure, etc.): ---

Test After Acid or Fracture Treatment: --- MCF/Day; Hours flowed ---

Choke Size --- Method of Testing: ---

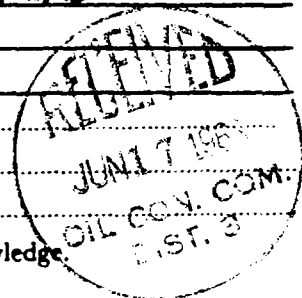
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated w/27,700 gals lease oil & 30,000 sand

Casing Press. --- Tubing Press. --- Date first new oil run to tanks June 9, 1963

Oil Transporter Navajo Corporation

Gas Transporter ---

Remarks: Well pumped 106 bbls in 24 hours.



I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved EM 17 1963, 19

SHelly OIL COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

Original Signed EMERY C. ARNOLD

By: ---

Title ---

By: J. W. Purge

(Signature)

Title Assistant District Superintendent

Send Communications regarding well to:

Name Shelly Oil Company

Box 38, Hobbs, New Mexico

DEVIATION AFFIDAVIT

Date June 13, 1963

New Mexico Oil Conservation Commission

1000 Rio Grande Road

Astec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of May 1963, Scott Bros. Drilling Company ran the following surveys for Skelly Oil Company on their Navajo lease, Well No. 4, in SW 1/4 of SW 1/4 of Sec. 35-32N-17W NMPH, Underslated Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

Depth In

Angle in Degrees

Depth In

Angle in Degrees

500'  
1000'  
1500'

1/2  
1-  
1-3/4

ILLEGIBLE

Subscribed and sworn to before me this 13 day of June 19 63

James W. Thompson  
Notary Public in and for said County and State

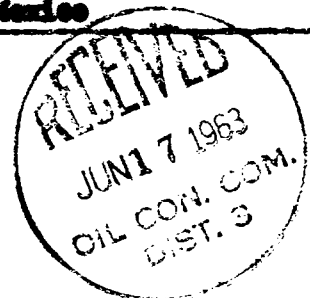
My Commission expires: 3-16-67

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

Name

J. W. George  
Assistant District Superintendent  
Position

Box 38, Hobbs, New Mexico  
Address



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PRODUCTION OFFICE	
OPERATOR	1

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator **Shelly Oil Company** Lease **Nevada 174** Well No. **1**

Unit Letter **2** Section **29** Township **30N** Range **17W** County **San Juan**

Pool **Many Rocks Galling** Kind of Lease (State, Fed Fee) **Federal - Indian**

If well produces oil or condensate give location of tanks Unit Letter **6** Section **24** Township **30N** Range **17W**

Authorized transporter of oil ☒ or condensate ☐ Address (give address to which approved copy of this form is to be sent)  
**El Paso Products Pipeline Company** **Box 1566, Farmington, New Mexico**

Is Gas Actually Connected? Yes ☐ No ☒

Authorized transporter of casing head gas ☐ or dry gas ☐ Date Connected Address (give address to which approved copy of this form is to be sent)

If gas is not being sold, give reasons and also explain its present disposition:  
**Gas wanted - waiting for gas connection.**

**REASON(S) FOR FILING (please check proper box)**

New Well ☐ Change in Ownership ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ☒ Dry Gas ☐  
 Casing head gas ☐ Condensate ☐

**ILLEGIBLE**

Remarks  
**Oil transporter to be changed effective August 1, 1963.**



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.  
 Executed this the **31** day of **July**, 19 **63**.

OIL CONSERVATION COMMISSION	By <b>J. W. George</b>
Approved by Original Signed By <b>A. R. KENDRICK</b>	Title <b>Assistant District Superintendent</b>
Title <b>PETROLEUM ENGINEER DIST. NO. 3</b>	Company <b>Shelly Oil Company</b>
Date <b>JUL 31 1963</b>	Address <b>Box 790, Hobbs, New Mexico</b>

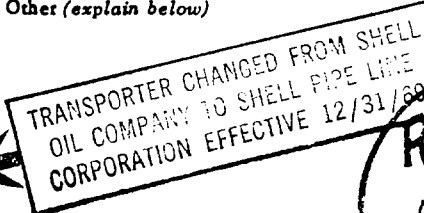
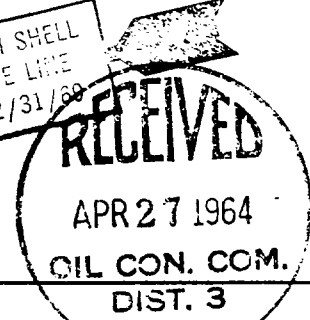


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PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo spm</b>		Well No. <b>4</b>									
Unit Letter <b>1L</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>											
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>											
If well produces oil or condensate give location of tanks		Unit Letter <b>10W</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>										
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1588 - Farmington, New Mexico</b> <b>XX</b>											
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>															
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> <b>None</b>		Date Connected	Address (give address to which approved copy of this form is to be sent)												
If gas is not being sold, give reasons and also explain its present disposition:  <b>Waiting on gas connection - Gas being vented.</b>															
<p align="center"><b>REASON(S) FOR FILING (please check proper box)</b></p> <table border="0"> <tr> <td>New Well <input type="checkbox"/></td> <td>Change in Ownership <input type="checkbox"/></td> </tr> <tr> <td>Change in Transporter (check one)</td> <td>Other (explain below)</td> </tr> <tr> <td>Oil <input checked="" type="checkbox"/></td> <td>Dry Gas <input type="checkbox"/></td> </tr> <tr> <td>Casing head gas <input type="checkbox"/></td> <td>Condensate <input type="checkbox"/></td> </tr> </table>								New Well <input type="checkbox"/>	Change in Ownership <input type="checkbox"/>	Change in Transporter (check one)	Other (explain below)	Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>	Casing head gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
New Well <input type="checkbox"/>	Change in Ownership <input type="checkbox"/>														
Change in Transporter (check one)	Other (explain below)														
Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>														
Casing head gas <input type="checkbox"/>	Condensate <input type="checkbox"/>														
<p align="center">   </p>															
Remarks <b>Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.</b>															
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the <b>24th</b> day of <b>April</b> , 19 <b>64</b> .															
OIL CONSERVATION COMMISSION				By <b>Charles J. Love</b>											
Approved by <b>Original Signed Emery C. Arnold</b>				Title <b>Dist. Engineer</b>											
Title <b>Supervisor Dist. # 3</b>				Company <b>Skelly Oil Company</b>											
Date <b>APR 27 1964</b>				Address <b>Box 730 - Hobbs, New Mexico</b>											

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. 14-20-600-3540
2. NAME OF OPERATOR Bay Star Petroleum	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR P.O. Box 2975 Corpus Christi, Texas 78403	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface	8. FARM OR LEASE NAME Navajo P
	9. WELL NO. P #4
	10. FIELD AND POOL, OR WILDCAT Many Rocks-Gallup
	11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec 35 T32N R17W

660 fwi + 1980 fsi

RECEIVED

SEP 20 1985

14. PERMIT NO.	15. ELEVATIONS (Show whether DP, RT, OR, etc.) 5768 68	12. COUNTY OR PARISH San Juan	13. STATE N.M.
----------------	---	----------------------------------	-------------------

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)			

(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 pertinent to this work.)\*

Work performed on 9/4/85. Mixed 3 barrels water with 1 barrel of Turflow. Set packer at 1580'. Swabbed well dry. Pumped chemical down tubing and filled remainder with water. Displaced chemical into formation with 4 barrels of H<sub>2</sub>O. Max pressure was 675 psi. Shut-in overnight and swabbed dry on 9/5/85. Put well back on pump 9/4/85. Production before: .4 BOPD 3 BWPD  
Production after: 1 BOPD 6 BWPD

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

SIGNED

*Ronald Tubaker*

TITLE

Geologist

DATE

9/16/85

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOCC

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

I. Operator  
A.P.A. Development Corporation  
Address  
P.O. Box 215, Cortez, Colorado 81321  
Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☒ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Gashead Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)  
DIST. 3

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 4	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Navajo State, Federal or Fee	Lease No. 14-20-600-3540
Location Unit Letter L : 660 Feet From The West Line and 1980 Feet From The South Line of Section 35 Township 32N Range 17W NMPM. San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, NM 87413				
Name of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	Is gas actually connected? When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Patricia B. Woolley  
(Signature)

Operator  
(Title)

10-12-88  
(Date)

OIL CONSERVATION DIVISION  
OCT 17 1988

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY Burt J. Shaw

TITLE SUPERVISION DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-600-3540

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Ute  
Mountain Tribal

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo "P"

9. WELL NO.

4

10. FIELD AND POOL, OR WILDCAT

Many Rocks Gallup

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

35-32N-17W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

## 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

Shelly Oil Company

3. ADDRESS OF OPERATOR

1840 Lincoln Street, Denver, Colorado 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface1980' FSL and 660' FWL, Section 35-32N-17W  
or NW/4 SW/4, Section 35

14. PERMIT NO.

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

5770' DF

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☒SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENTS ☐(NOTE: Report results of multiple completion or 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 pertinent to this work.)\*

9/25/67: Pulled rods and tubing. Ran sand-oil treatment through 4-1/2" OD casing. Perforations 1622'-1629' with 3,000 gallons lease oil and 4,000# 20-40 sand and 100# Para-Chok; maximum treating pressure 1400#; minimum 1200#; injection rate 8 barrels per minute; instant sand pressure 600#; on vacuum in 15 minutes; sand pumped free sand 1629'-1630' and loose paraffin 1630'-1660'. Ran 2" tubing and rods. Set insert pump at 1608'.

9/27/67: POB 24 hours 18/30" SPM, 16 barrels load oil.

9/28/67: POB 24 hours 16/30" SPM, 75 barrels load oil.

9/29/67: POB 24 hours 15/30" SPM, 60 barrels load oil.

9/30/67: POB 24 hours 15/30" SPM, 29 barrels load oil, 44 barrels formation oil.

10/1/67: POB 24 hours 16/30" SPM, 61 barrels formation oil, no water.

10/2/67: POB 24 hours 16/30" SPM, 48 barrels formation oil, no water.



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

SIGNED

*Edward H. Hargis*

TITLE District Superintendent

DATE October 6, 1967

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

OCT 9 1967

\*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY  
FARMING, N. M.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

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 reenter a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

070 FARMINGTON, NM

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

A.P.A. Development, Inc.

3. Address and Telephone No.

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

660' FWL + 1980' FSL

L-35-32N-17W

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

Navajo "P"

8. Well Name and No.

4

9. API Well No.

3004511600051

10. Field and Pool, or Exploratory Area

Many Rocks

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  
☐ 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.)

Plan to Plug well as follows:

1. Pump cement Plug from 1650' to 1450'
2. Pump fresh water from 1450' to 150'
3. Pump cement Plug from 150' to Surface
4. Cut off well head, weld on dry hole marker.

RECEIVED  
JUL 17 1993

OIL COIL. DIV.  
DIST. 3

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

Signed Patricia Woolley

Title

Date 6/27/96

(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 Instruction on Reverse Side

NMOCD

1996

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

A P A Development Inc Colorado

3. Address and Telephone No.

4067 S.W. 97 Ct, Miami Fla 33165

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

This Well Navajo P- 4 1980 FSL and 660 FWL

Sec 35 T32N R 17 W

5. Lease Designation and Serial No.

14-20-3540

6. If Indian, Allottee or Tribe Name

Navajo Tribal

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Navajo P # 4

9. API Well No.

32045-11160

10. Field and Pool, or Exploratory Area

Many Rocks

11. County or Parish, State

San Juan N.M.

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

☒ 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.)

This Well Navajo P # 4 has produced over 94,000 Barrels of Oil Primary Electric problems with Hi Line Transormers as well as needs Rods and Tubing pulled due to tubing leak have a jack to put back on Production I am asking for 6 Months to do this Sept 1 to March 1 1998

REMOVE INTENT TO PLUG.

RECEIVED  
SEP 17 1997

OIL COAL DEV.

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

Signed

*William C. Brown*

Title

*Pres A P A Dev*

Date

8-30-97

(This space for Federal or State office use)

Approved by */s/ Duane W. Spencer*

Title

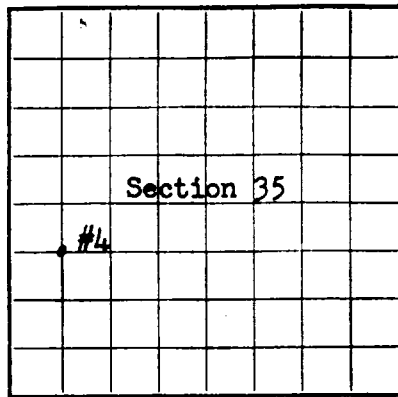
Date *SEP 15 1997*

Conditions of approval, if any:

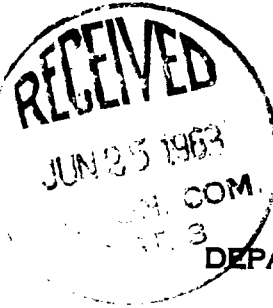
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

NMOC



LOCATE WELL CORRECTLY



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Window Rock  
U. S. LAND OFFICE  
SERIAL NUMBER 14-20-600-3540  
LEASE OR PERMIT TO PROSPECT

## LOG OF OIL OR GAS WELL

Company Skelly Oil Company Address Box 38 - Hobbs, New Mexico  
Lessor or Tract Navajo "P" Field Undesignated Gallup State New Mexico  
Well No. 4 Sec. 35 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
Location 1980 ft. N. of S. Line and 660 ft. E. of W. Line of Section 35 Elevation 5770' DF  
(Derrick floor relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Signed

(ORIGINAL)  
**H. E. Ash**Date June 19, 1963Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

Commenced drilling May 28, 1963 Finished drilling May 31, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1622' to 1629' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
7-5/8"	17.7	8	SJSW	20'	Guide	1622'	1622'	1629'	Surface
4-1/2"	8.5	8	U-55	1675'	Float	1622'	1622'	1629'	Production
HIS LOG IS A COPY OF THE ORIGINAL LOG OF THE WELL									
U.S. GEOLOGICAL SURVEY, WASHINGTON, D.C.									

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8"	28'	10	By Hand	—	—
4-1/2"	1681'	100	Pump & Plug	—	—

ILLEGIBLE

Adapters—Material

Size

## SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" OD casing perfor. 1612-1617 with 27,700 gallons lease oil and 30,000 13/16" Sand.						

## TOOLS USED

Rotary tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet.  
 Cable tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet.

## DATES

\_\_\_\_\_, 19\_\_\_\_ Put to producing \_\_\_\_\_, 19\_\_\_\_

The production for the first 24 hours was \_\_\_\_\_ barrels of fluid of which \_\_\_\_\_ % was oil; \_\_\_\_\_ % emulsion; \_\_\_\_\_ % water; and \_\_\_\_\_ % sediment. Gravity, °Bé. \_\_\_\_\_

If gas well, cu. ft. per 24 hours \_\_\_\_\_ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_

Rock pressure, lbs. per sq. in. \_\_\_\_\_

## EMPLOYEES

\_\_\_\_\_, Driller \_\_\_\_\_, Driller  
 \_\_\_\_\_, Driller \_\_\_\_\_, Driller

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	168	168	Sand & Shale -
168	1127	1127	Sand & Shale - Top Mancos - 168'
1295	1475	180	Sand & Shale - Top Middle Gallup - 1295'
1475	1622	147	Sand & Shale - Top Lower Gallup - 1475'
1622	1642	20	Sand & Shale - Top Tecito Sand - 1622'
1642	1665	43	Sand & Shale - Top Sansted - 1642'
	1666		
		Total Depth	
		Plug Back Total Depth	

Geological Tops by Schlumberger Induction - Gamma Ray Log.

Core No. 1 - 1617' - 1637' - Recovered 20'

Top - 7' - Shale  
 Next - 1' - Sandy Shale  
 Next - 7' - Sand - Oil Saturated  
 Next - 4' - Shale

FROM—	TO—	TOTAL FEET	FORMATION
-------	-----	------------	-----------

LOCATION RECORD—CONTINUED

16-43094-5

ILLEGIBLE



NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR		4	
PRORATION OFFICE			

Operator  
**Getty Oil Company**

Address  
**Box 3360, Casper, Wyoming 82602**

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of:

Recompletion ☐ Oil ☐ Dry Gas ☐

Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner **Skelly Oil Company, Box 3360, Casper, WY 82602**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "P"</b>	Well No. <b>4</b>	Pool Name, Including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Federal</b>	Lease No. <b>14-20-600-3540</b>
Location				
Unit Letter <b>L</b>	<b>660</b>	Feet From The <b>West</b>	Line and <b>1980</b>	Feet From The <b>South</b>
Line of Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>	, NMPM, <b>San Juan</b> County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>Shell Pipeline Corp.</b>	<b>Box 1588, Farmington, NM</b>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit <b>C</b>	Sec. <b>34</b>	Twp. <b>32N</b>	Rge. <b>17W</b>	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.
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)

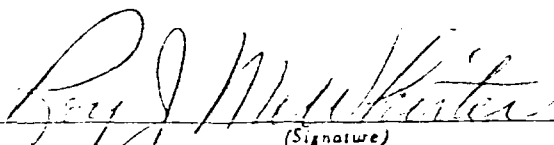
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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



Area Superintendent

2/4/77

(Date)

OIL CONSERVATION COMMISSION

APPROVED **FEB 15 1977**, 19

BY **ORIGINAL SIGNED BY N. E. MAXWELL, JR.**

TITLE **PETROLEUM ENGINEER (C-104) 3**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	2
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "p"	Well No. 4	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location Unit Letter <u>L</u> ; <u>660</u> Feet From The <u>West</u> Line and <u>1980</u> Feet From The <u>South</u> Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Hooley  
(Signature)  
Operator  
(Title)  
9-11-79  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19  
Original Signed by A. R. Kendrick  
BY  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

I.

Operator WTR OIL COMPANY		
Address Drawer LL, Cortez, Colorado 81321		
Reason(s) for filing (Check proper box)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
Other (Please explain)		

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "p"	Well No. 4	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location				
Unit Letter L	660	Feet From The West	Line and 1980	Feet From The South
Line of Section 35	Township 32N	Range 17W	, NMPM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Pge. 17W	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.
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 Tanks	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/MCF	Gravity of Condensate
Testing Method (piston, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Lee P. Secoy  
(Signature)  
Office Manager  
8-24-82  
(Date)

OIL CONSERVATION COMMISSION

AUG 25 1982  
APPROVED  
Original Signed by FRANK T. CHAVEZ  
BY  
TITLE  
SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I.

Operator BayStar Petroleum Corporation	
Address P. O. Box 2975, Corpus Christi, Texas 78403	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Navajo "P"</u>	Well No. <u>4</u>	Pool Name, including Formation <u>Many Rocks Gallup</u>	Kind of Lease <u>Navajo Federal</u> State, Federal or Fee	Lease No. <u>14-20-600-3540</u>
Location				
Unit Letter <u>L</u> ; <u>660</u> Feet From The <u>West</u> Line and <u>1980</u> Feet From The <u>South</u>				
Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Ciniza Pipe Line, Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1887, Bloomfield, NM 87413</u>			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit <u>C</u>	Sec. <u>34</u>	Twp. <u>32N</u>	Rge. <u>17W</u>
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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)

Michael H. North, President

May 2, 1985

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

OIL CONSERVATION DIVISION

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

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

I.

Operator A.P.A. Development Inc.	Well API No.
Address P.O. Box 215, Cortez, CO 81321	
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 checked="" 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 Navajo "P"	Well No. 4	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Nava jo State, Federal or Fee 14-20-600-3540
Location Unit Letter L : 660 Feet From The West Line and 1980 Feet From The South Line Section 35 Township 32N Range 17W, NMPM, San Juan County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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.	MCF

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

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.

Signature  
Patrick B. Woosley  
Printed Name  
8/7/90  
Date  
(303) 565-2458  
Telephone No.

Operator  
Title

OIL CONSERVATION DIVISION

AUG 28 1990

Date Approved

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.

Submit 5 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 Pecos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator A.P.A. Development, Inc.		Well API No. 300451116000S1
Address P.O. Box 215, Cortez, CO 81321		
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"/>	<input checked="" 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 Navajo "P"	Well No. 4	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-600-3540
Location				
Unit Letter L	: 660	Feet From The West	Line and 1980	Feet From The South
Section 35	Township 32N	Range 17W	NMPM,	San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Gary-Williams Energy Corporation	370 - 17th St., Ste 5300, Denver, CO 80202-5653					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.D.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 DEC 1 4 1993
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF OIL CON. DIV

DIST. 3

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pw)	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.

Signature  
Patrick Woosley  
Printed Name  
12/6/93  
Date  
Operator  
Title  
303-565-2458  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved  
DEC 1 4 1993

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.
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- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.





APA Development  
NAVAJO P#5  
N-35-32N 17W.  
6605 1980W  
45-11153

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 *APA Development Corp.*

*% NMOCO*

3. Address and Telephone No.

*1000 Rio Grande Rd. Aztec NM 87410 334-6128*

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

*35-32N-17W 660/5 1980/10*

5. Lease Designation and Serial No.

*14-20-600-3540*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*5 Navajo P*

9. API Well No.

*30045 11153*

10. Field and Pool, or Exploratory Area

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

☐ 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.)\*

*See attached plugging procedure.*

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

Signed

*NMOCO Contract Plugging*

Date

*8/11/00*

(This space for Federal or State office use)

Approved by

Title

Date

*8/17/00*

Conditions of approval, if any:



API NUMBER 30-045-11153

OPERATOR NAME APA DEVELOPMENT CORP WELL NUMBER

5

PROPERTY NAME NAVAJO P

SECTION 35 TOWNSHIP 32N RANGE 17W

FOOTAGE 660 FSL 1980 FWL UL "N"

Sur Csg OD NA HOLE	7 5/8	XX		XX
SUR CSG TD	28	XX		XX
SUR CSG WT	17.7	XX		XX
TOP OF CMT	0	XX		XX
ACTUAL		XX		XX
CACULATED	10SX	XX		XX
PROD CSG OD 6 1/4	4 1/2	XX		XX
PROD CSG TD	1707	XX		XX
PROD CSG WT	9.5	XX		XX
TOP OF CMT	852	XX	XX	XX
FORMATION TOP	ACTUAL	EST	XX	XX
GALLUP 1330'	CACULATED	100SX	XX	XX
MANCOS 200	PERF TOP	1650	XX	XX
	PERF BOTTOM	1660	XX	XX
	PACKER		XX	XX
	TYPE OF PLUG		XX	XX
	CIBP & CMT		XX	XX
	CMT		XX	XX

#### PROPOSED PLUGGING OPERATION

**MIRU PU, BOPE, TOO H W/RODS & TUBING, PICK UP WORK STRING, CIRC HOLE**

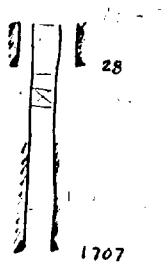
SPOT 14 SX PLUG 1380-1230, WOC TAG, FILL AS REQUIRED,

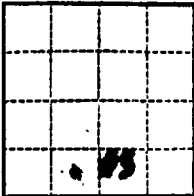
PERF @ 250' PUMP 32 SX, 250-150', 18 SX OUTSIDE CSG, 14 SX INSIDE CSG

PERF @ 78' CIRC CEMENT TO SURFACE, EST 17 SX

CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS

**Close pits according to guidelines: Clean and level location**





(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Budget Bureau No. 43-R380  
Approval expires 12-31-60

Indian Agency

State

Allottee

Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

June 3, 1963

Well No. 5 is located 440 ft. from S line and 1900 ft. from W line of sec. 35

Sec. 35  
(4 Sec. and Sec. No.)  
Undersaturated Gallup  
(Field)

12N 17W  
(Twp.) (Range)  
San Juan  
(County or Subdivision)

107N  
(Meridian)  
New Mexico  
(State or Territory)

The elevation of the derrick floor above sea level is 5791 ft. (est.)

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 5 to around 1700' to test Gallup formation.

Our casing program is as follows:

20' - 7-5/8" OD 17.7# Spiral Weld Casing - to be cemented with 10 sacks regular cement.

1700' - 4-1/2" OD 9.5# J-55 casing - to be cemented with 75 sacks regular cement w/4% gal and 25% gilsonite and 25 sacks regular w/2% calcium chloride.

ILLEGIBLE



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY

Address BOX 30

ROSE, NEW MEXICO

By

Title Asst. Dist. Supt.

# NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

## SECTION A.

Date June 3, 1963

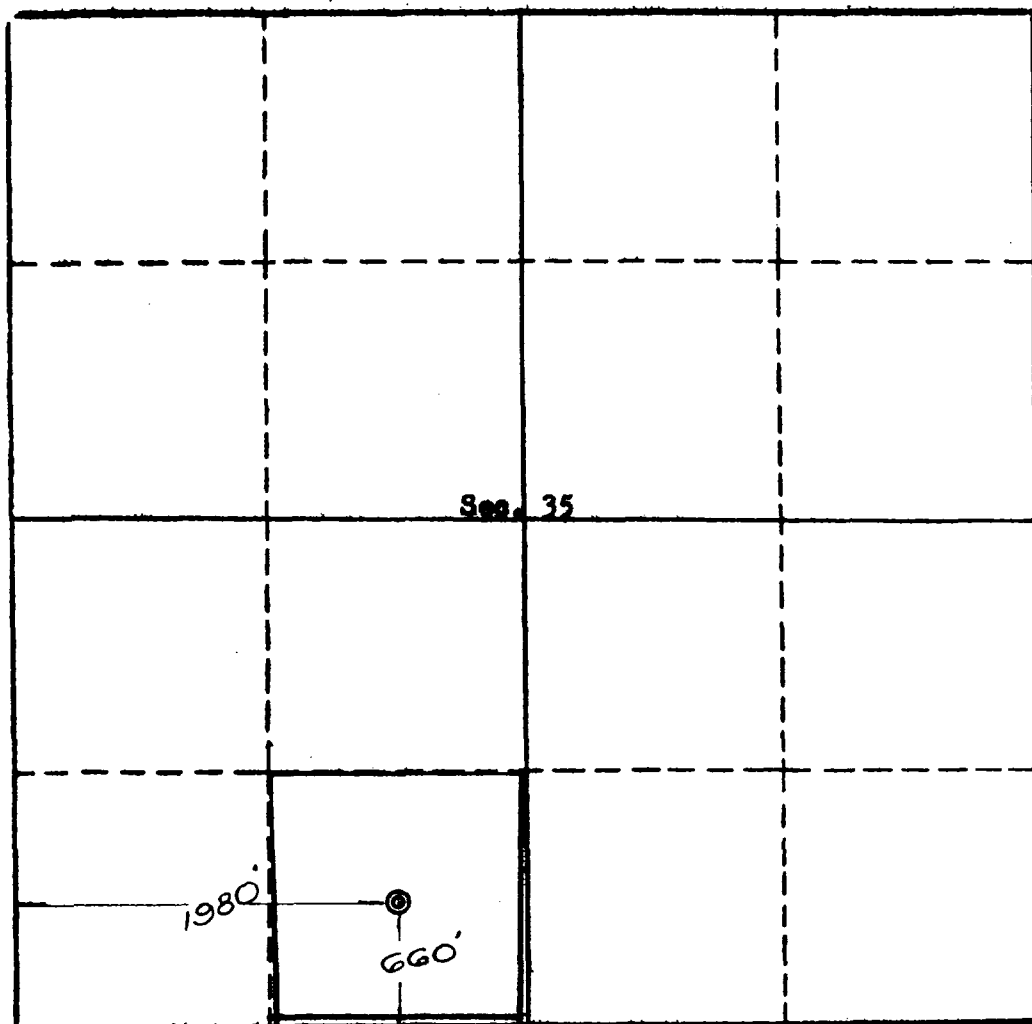
Operator Skelly Oil Company Lease Navajo "P"  
 Well No. 5 Unit Letter M Section 35 Township 32 North Range 17 West NMPM  
 Located 660 Feet From South Line, 1980 Feet From West Line  
 County San Juan G. L. Elevation 5791 Dedicated Acreage 40 Acres  
 Name of Producing Formation Gallup Pool Undesignated Gallup

1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_. If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

## SECTION B.



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY  
(OPERATOR)

*J. W. George*  
(REPRESENTATIVE)  
Box 38, Hobbs, New Mexico  
(ADDRESS)

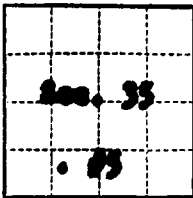
STATE OF NEW MEXICO  
E. V. ECHENHAWK  
REGISTERED LAND SURVEYOR  
This is to certify that the well location shown on the plat in Section B was plotted from field notes of actual surveys made by me or under my supervision and that the same are true and correct to the best of my knowledge and belief.

Date Surveyed May 16, 1963

Four States Engineering Co.  
FARMINGTON, NEW MEXICO

*Emmett H. Tolshaw*  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_

Navajo Mts

Allottee Mountain Tribal

Lease No. 14-20-422-3510

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	<input checked="" type="checkbox"/>
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	Perforating & Treating	<input checked="" type="checkbox"/>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

July 10, 1963

Navajo "P"  
Well No. 5 is located 640 ft. from [N] line and 1900 ft. from [W] line of sec. 35

SW/4 NW/4 Sec. 35  
(1/4 Sec. and Sec. No.)

3N  
(Twp.)

17W  
(Range)

N.M.P.M.  
(Meridian)

Undesignated Gallup  
(Field)

San Juan  
(County or Subdivision)

New Mexico  
(State or Territory)

RECEIVED

JUL 11 1963

The elevation of the derrick floor above sea level is 5791 ft.

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Well opened June 7, 1963. Set 7-5/8" 60 casing at 26' & cemented by hand. W.O.C. Drilled to 1647'.

COSE RT. 1 - 1641' - 1641' - (20') - Recovered 20'

Top - 7' - Shale  
Next - 2' - Shale with Sand streaks  
Next - 10' - Gray sand oil saturated  
Next - 1' - Sandy shale

Reached total depth of 1715' on June 13, 1963. Set 4-1/2" 60 casing at 1709' and cemented with 100 sacks. W.O.C. 24 hrs. Shut off tested OK. Did not drill any casing at 1641'. PTD 1641'. Perforated 4-1/2" 60 casing from 1630-1640' for a total of 10' and 40 holes. Treated through 4-1/2" 60 casing perfor. 1630-1640' with 29,736 gallons lease oil and 30,000 20/40 sand. After recovering all lease oil well pumped 160 barrels of oil in 24 hours.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 790

Hobbs, New Mexico

ILLEGIBLE

By (ORIGINAL) H. E. Aab

Title Dist. Supt.

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PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*BT*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Baraja #7</b>		Well No. <b>5</b>	
Unit Letter <b>E</b>	Section <b>35</b>	Township <b>34N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Undesignated Gilling</b>				Kind of Lease (State, Fed Etc) <b>Federal-Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>E</b>	Section <b>34</b>	Township <b>34N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Midco Corporation</b>				Address (give address to which approved copy of this form is to be sent) <b>330 Petroleum Building, Atlanta, Tenn</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection**

**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 26 day of June, 19 63.

**OIL CONSERVATION COMMISSION**

Approved by

**Original Signed Emery C. Arnold**

Title

**Supervisor Dist. # 3**

Date

**JUN 28 1963**

By

Title

Company

Address

*J. W. George*  
**Assistant District Superintendent**  
**Shelly Oil Company**  
**Box 730, Hobbs, New Mexico**

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TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - ~~ALLOWABLE~~ ALLOWABLE ILLEGIBLE

BT.  
New Well

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico

June 26, 1963

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Shelly Oil Company

Navajo "P"

, Well No. 5, in. 24 1/4, 22 1/4,

(Company or Operator)

(Lease)

Unit Letter

N, Sec. 35, T. 35N, R. 17W, NMPM, Undesignated Gallup Pool

San Juan

County. Date Spudded. 6-7-63

Date Drilling Completed 6-13-63

Please indicate location:

Elevation 5797' ASL Total Depth 1715' PBD 1692'

Top Oil/Gas Pay 1620' Name of Prod. Form. Colling

PRODUCING INTERVAL -

Perforations 1620-1640'

Open Hole --- Depth --- Casing Shoe 1707' Depth --- Tubing 1646'

OIL WELL TEST -

Natural Prod. Test: --- bbls. oil, --- bbls water in --- hrs, --- min. Size ---

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 160 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size ---

GAS WELL TEST -

Natural Prod. Test: --- MCF/Day; Hours flowed --- Choke Size ---

Method of Testing (pitot, back pressure, etc.): ---

Test After Acid or Fracture Treatment: --- MCF/Day; Hours flowed ---

Choke Size --- Method of Testing: ---

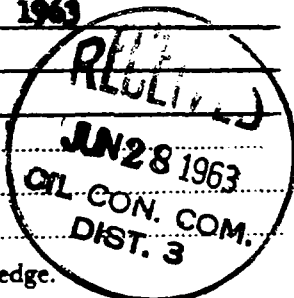
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated 27,735 gals. lease oil & 20,000 sand

Casing Tubing Date first new Press. --- Press. --- oil run to tanks June 22, 1963

Oil Transporter Matwood Corporation

Gas Transporter

Remarks: Well pumped 160 barrels in 24 hours.



I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUN 28 1963, 19

SKELLY OIL COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

By: J. W. George (Signature)

By: Original Signed Emery C. Arnold

Title Assistant District Superintendent

Title Supervisor Dist. # 3

Send Communications regarding well to:

Name Shelly Oil Company

Address Box 730, Hobbs, New Mexico

DEVIATION AFFIDAVIT

Date June 26, 1963

New Mexico Oil Conservation Commission

1000 Rio Grande Road

Alamosa, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

ILLEGIBLE

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of June 1963, Scott Brothers Drilling Company ran the following surveys for Skelly Oil Company on their Lease SP lease, Well No. 5, in SW 1/4 of SW 1/4 of Section 35-32N-17W NMPH, Undesignated Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
500'	1		
1000'	1-1/4		
1500'	1-1/4		

Subscribed and sworn to before me this 26 day of June 19 63

Jesse W. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

Name J. W. George

Assistant District Superintendent  
Position

Box 730, Hobbs, New Mexico  
Address



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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

B.T.

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #7</b>		Well No. <b>5</b>	
Unit Letter <b>H</b>	Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Many Heads Galling</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>G</b>	Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1560, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection.**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☒ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

**ILLEGIBLE**

Remarks

**Oil transporter to be changed effective August 1, 1963.**



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 31 day of July, 19 63.

**OIL CONSERVATION COMMISSION**

Approved by

Original Signed By  
**A. R. KENDRICK**

Title

**PETROLEUM ENGINEER DIST. NO. 3**

Date

**JUL 31 1963**

By

Title

**Assistant District Superintendent**

Company

**Shelly Oil Company**

Address

**Box 730, Hobbs, New Mexico**



NUMBER OF COPIES RECEIVED	
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OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "N"</b>		Well No. <b>5</b>	
Unit Letter <b>"N"</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Mary Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>"N"</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 1588 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>  <b>None</b>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

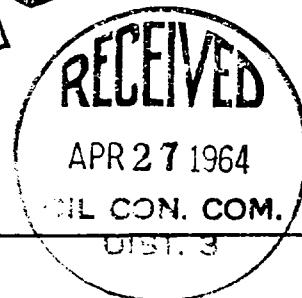
**Waiting on gas connection - Gas being vented.**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☒ Dry Gas ..... ☐  
 Casing head gas ..... ☐ Condensate ..... ☐

Change in Ownership .....  
 Other (explain below)

**TRANSPORTER CHANGED FROM SHELL  
 OIL COMPANY TO SHELL PIPE LINE  
 CORPORATION EFFECTIVE 12/31/69**



Remarks

**Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 24th day of April, 19 64.

OIL CONSERVATION COMMISSION		By <i>Charles J. Love</i>	
Approved by  <b>Original Signed Emery C. Arnold</b>		Title <b>Dist. Engineer</b>	
Title  <b>Supervisor Dist. # 3</b>		Company <b>Skelly Oil Company</b>	
Date  <b>APR 27 1964</b>		Address <b>Box 730 - Hobbs, New Mexico</b>	

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 to convert 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

A. P. A. Development, Inc.

3. Address and Telephone No.

Box 215 Cortez, CO 81321

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

1980' FWL & 660' FSL S 35 T 32N R 17W  
N

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

Navajo "P"

8. Well Name and No.

5

9. API Well No.

3004511530051

10. Field and Pool, or Exploratory Area

Many Rocks

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

- ☐ 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.)

Plan to Plug well as follows:

1. Pump Cement Plug from 1680' to 1400'
2. Pump fresh water from 1400 to 150'
3. Pump cement Plug from 150' to Surface
4. Cut off well head, weld on dry hole marker

RECEIVED  
JUL 17 1996

OIL CON. DIV.  
DIST. 3

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

Signed Pete Wooley

Title

Date 6/27/96

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date

APPROVED

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

NMOCD

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.  
14-20-608- 3540

6. If Indian, Allottee or Tribe Name

Navajo Tribal

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Navajo P - #5

9. API Well No.

35-32-17

10. Field and Pool, or Exploratory Area

Many Rocks

11. County or Parish, State

San Juan N.M.

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

A P A Development Inc.

3. Address and Telephone No.

4067 S.W. 97 Ct. Miami, Fla 33165

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

This Well Navajo P 5 660 FSL and 1980 FWL Sec 35 T  
T 32NR 17 W San Juan County, New Mexico

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  
☒ 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.)\*

This Well Navajo P-5 Has been ready for producyion BUT NEEDS  
RODS PUELED Electric problems with Transformer on this line.  
Will put back into production when that is fixed. Due to the  
Elec, Contractor Too busy and Pulling unit tied up on plugging  
wells. Steve said I should ask for 6 months to put on production.  
Sept1 that would be March 1 1998. P- 5 produced 149,000 Barrels on  
Production should do good on Secondary Repressurizing.

REMOVE INTENT TO PLUG

RECEIVED  
SEP 17 1997

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

Signed *William G. Brown*

Title *Pres A P A Dev Inc*

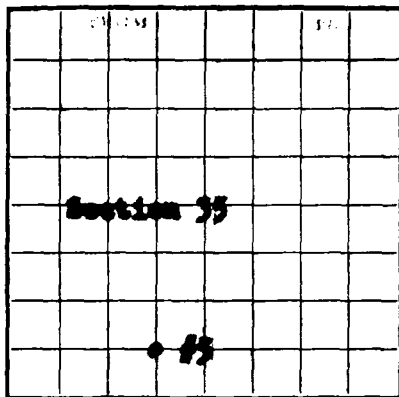
Date *8-30-97*

(This space for Federal or State office use)

Approved by */s/ Duane W. Spencer*  
Conditions of approval, if any:

Title

Date *SEP 15 1997*



LOCATE WELL CORRECTLY

Form approved.  
Budget Bureau No. 42-R355.4.U. S. LAND OFFICE ~~Window Book~~  
SERIAL NUMBER ~~14-20-600-3540~~  
LEASE OR PERMIT TO PROSPECT

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

# ILLEGIBLE

## LOG OF OIL OR GAS WELL

Company Shelly Oil Company Address Box 730 - Hobbs, New Mexico  
 Lessor or Tract Nevado SPA Field Undesignated Gallup State New Mexico  
 Well No. 5 Sec. 35 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
 Location 640 ft.  $\begin{Bmatrix} N \\ S \end{Bmatrix}$  of 8 Line and 1900 ft.  $\begin{Bmatrix} E \\ W \end{Bmatrix}$  of 4 Line of Section 35 Elevation 5791 ft.  
 (Derive from relative to 1916)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Signed (Signature) H. E. Aeb

Date July 10, 1963Title Dist. Dept.

The summary on this page is for the condition of the well at above date.

Commenced drilling June 7, 1963 Finished drilling June 13, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1649 to 1660 No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
of shoes. It differs in riggers were put in to test for water, this kind of material placed position and require of blowing or running. The shoes were left in the well and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. The shoes were placed in the casing and the riggers were pulled out. 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The shoes were placed in the casing and the riggers were pulled									

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8"	28'	10	By Hand		
7-5/8"	1707'	100	Pump & Plug		

MARK

2 Heaving plug—Material \_\_\_\_\_ Length \_\_\_\_\_ Depth set \_\_\_\_\_  
 Adapters—Material \_\_\_\_\_ Size \_\_\_\_\_

### SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4 1/2" casing perfor. 1490 - 1660' with 29,736 gallons lease oil, 30,000# 20/40 sand and 12 ball sealers.						

### TOOLS USED

Rotary tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Cable tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

### DATES

\_\_\_\_\_, 19\_\_\_\_ Put to producing June 22, \_\_\_\_\_, 1940  
 The production for the first 24 hours was 140 barrels of fluid of which 99.9% was oil; \_\_\_\_\_%  
 emulsion; \_\_\_\_\_% water; and 0.1% sediment. Gravity, °Bé. 41.3  
 If gas well, cu. ft. per 24 hours \_\_\_\_\_ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_  
 Rock pressure, lbs. per sq. in. \_\_\_\_\_

### EMPLOYEES

\_\_\_\_\_, Driller \_\_\_\_\_, Driller  
 \_\_\_\_\_, Driller \_\_\_\_\_, Driller

### FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	200	200	Sand & Shale
200	1390	1190	Sand & Shale - Top Mancos - 200'
1390	1902	172	Sand & Shale - Top Middle Gallup - 1390'
1902	1648	146	Sand & Shale - Top Lower Gallup - 1902'
1648	1664	16	Sand & Shale - Top Tecite - 1648'
1664	1715	51	Sand & Shale - Top Sanastee - 1664'
	1715	Total Depth	
	1692	Plug Back Total Depth	
Geological Tops by Schlumberger's Induction - Gamma Ray Log			
CORE NO. 1 - 1441' - 1661' - (20') - Recovered 20'			
Top -	7' -	Shale	
Next -	2' -	Shale with sand streaks	
Next -	10' -	Gray sand, oil saturated	
Next -	1' -	Sandy Shale	
FROM—	TO—	LOST FEET	FORMATION

ILLEGIBLE

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DISTRIBUTION	
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FILE	
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LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-  
Effective 1-1-65

I. Operator  
Getty Oil Company  
Address  
Box 3360, Casper, Wyoming 82602  
Reason(s) for filing (Check proper box)  
New Well ☐ Change In Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change In Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
If change of ownership give name and address of previous owner  
Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 5	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-200-200-3540
Location Unit Letter N : 1980 Feet From The West Line and 660 Feet From The South Line of Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, NM					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKE, 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

  
(Signature)  
Area Superintendent  
(Title)  
2/4/77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
ORIGINAL SIGNED BY N. E. MAXWELL, JR.  
SY\_\_\_\_\_  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

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DISTRIBUTION	
SANTA FE	
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	3
PRORATION OFFICE	

I.

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 5	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal State, Federal or Fee	Lease No. 14-20-600-3540
Location Unit Letter N ; 1980 Feet From The West Line and 660 Feet From The South				
Line of Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington N.M 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Hooley  
(Signature)  
Co. Operator  
(Title)  
Sept. 11, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19  
BY Original Signed by M. R. Hendrick  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I.

Operator WTR OIL COMPANY		
Address Drawer LL, Cortez, Colorado 81321		
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 5	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location				
Unit Letter N	1980	Feet From The West	Line and 660	Feet From The South
Line of Section 35	Township 32N	Range 17W	NMPM, San Juan	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Ciniza Pipe Line, Inc.	P.O. Box 1887, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, CR, 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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

*Lee E. Secoy*  
(Signature)

Office Manager

8-24-82  
(Date)

OIL CONSERVATION COMMISSION

AUG 25 1982

APPROVED \_\_\_\_\_, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

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Separate Form C-104 must be filed for each pool in multiply



NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator	BayStar Petroleum Corporation
Address	P. O. Box 2975, Corpus Christi, Texas 78403
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Navajo "P"	5	Many Rocks Gallup	Federal	14-20-600-3540
Location				
Unit Letter	N	1980	Feet From The	West
		Line and	660	Feet From The
		South		
Line of Section	35	Township	32N	Range
		17W	, NMPM, San Juan	
		County		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Ciniza Pipe Line, Inc.	P. O. Box 1887, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.	Is gas actually connected?	When
	C	34	32N	17W		

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 2, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 6 1985  
BY Frank J. O'Donoghue  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

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.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR Bay Star Petroleum Corporation	3. ADDRESS OF OPERATOR P.O. Box 2975 Corpus Christi, Texas 78403	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' fwl + 660' fsl from the SW/4 of section 35.	5. LEASE DESIGNATION AND SERIAL NO. 14-20-600-3540	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Navajo P	9. WELL NO. # 5	10. FIELD AND POOL, OR WILDCAT Many Rocks-Gallup	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 35-T32N-R17W	12. COUNTY OR PARISH San Juan	13. STATE N.M.
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5784 GR											

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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 pertinent to this work).\*

Work performed on 7/16/85. Pumped 4 barrels of water down back to test packer at 1620', packer held. Mixed 3 barrels of water with 1 barrel of TurFlow. Pumped chemical down tubing and displaced with 7 barrels of water. Shut-in over night. Swabbed dry and put back on production on 7/17/85.

Production before treatment: 0.5 BOPD 5 BWPD

Production after treatment: 3 BOPD 25 BWPD

RECEIVED

AUG 19 1985

OIL CON. DIV.  
DIST. 3

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

SIGNED

*Robert J. Whelan*

TITLE

*Geologist*

DATE

*8/14/85*

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*AUG 16 1985*

FARMINGTON RESOURCE AREA

BY *SM*

\*See Instructions on Reverse Side

NMOCC

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**R** 10-17-88

I.

Operator <b>A.P.A. Development Corporation</b>	<b>OIL CON. DIV.</b> <b>DIST. 3</b>
Address <b>P.O. Box 215, Cortez, Colorado 81321</b>	
Reason(s) for filing (Check proper box)	
<input type="checkbox"/> New Well	Change in Transporter of:
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate
Other (Please explain)	

If change of ownership give name and address of previous owner **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "P"</b>	Well No. <b>5</b>	Pool Name, including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Navajo</b>	Lease No.
			State, Federal or Fee <b>14-20-600-</b>	<b>3540</b>
Location				
Unit Letter <b>N</b> : <b>1980</b> Feet From The <b>West</b> Line and <b>660</b> Feet From The <b>South</b>				
Line of Section <b>35</b> Township <b>32N</b> Range <b>17W</b> NMPM, <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Ciniza Pipe Line, Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1887, Bloomfield, NM 87413</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<b>C 34 32N 17W</b>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Patrick B. Woolley*  
(Signature)  
**Operator**  
(Title)  
**10-12-88**  
(Date)

OIL CONSERVATION DIVISION

**OCT 17 1988**

APPROVED \_\_\_\_\_, 19\_\_\_\_\_  
BY *[Signature]*  
TITLE **SUPERVISION DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

OIL CONSERVATION DIVISION

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

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 A.P.A. Development Inc.		Well API No.
Address P.O. Box 215, Cortez, CO 81321		
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"/>	<input checked="" 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 Navajo "P"	Well No. 5	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Navajo State, Federal or Fee	Lease No. 14-20-600-3540
Location Unit Letter N : 1980 Feet From The West Line and 660 Feet From The South Line Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	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.

Signature  
Patrick B. Woosley  
Printed Name  
8/7/90  
Date  
(303)565-2458  
Telephone No.

Operator  
Title

OIL CONSERVATION DIVISION

Date Approved AUG 28 1990

By  
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 Pecos Rd., Aztec, NM 87410

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

Operator A.P.A. Development, Inc.		Well API No. 300451115300S1
Address P.O. Box 215, Cortez, CO 81321		
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"/>	<input checked="" 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 Navajo "P"	Well No. 5	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-600-3540
Location Unit Letter <u>N</u> : <u>1980</u> Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>South</u> Line Section <u>35</u> Township <u>32N</u> Range <u>17W</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 checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary-Williams Energy Corporation	Address (Give address to which approved copy of this form is to be sent) 370 - 17th St., Ste 5300, Denver, CO 80202-5653					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.D.T.D.			
Elevations (D.F., R.R.D., R.F., G.R., 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 DEC 14 1993
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF OIL CON DIST.

#### 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

#### 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.

Signature Patrick Woosley Operator  
Printed Name Patrick Woosley Title  
Date 12/6/93 Telephone No. 303-565-2458

#### OIL CONSERVATION DIVISION

Date Approved DEC 14 1993

By Barry Chang  
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.





7.20.2000

APA Development  
NAVAJO P #6  
P-35-32N-17W  
660S 660E  
45-11152

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 *APA Development Corp.*

*% NMOC*

3. Address and Telephone No.

*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

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

*35-32N-17W 660/SE*

5. Lease Designation and Serial No.

*14-20-600-3540*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*6 Navajo P*

9. API Well No.

*30045 11152*

10. Field and Pool, or Exploratory Area

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

- ☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOC* *Contract* *Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

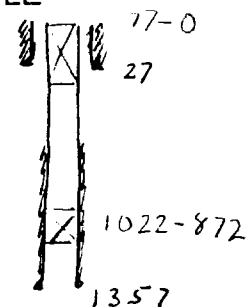
Date *8/17/00*

**API NUMBER** 30-045-11152  
**OPERATOR NAME** APA DEVELOPMENT CORP **WELL NUMBER** 6  
**PROPERTY NAME** NAVAJO P  
**SECTION 35** **TOWNSHIP 32N** **RANGE 17W**  
**FOOTAGE** 660 FSL 660 FEL UL "P"

	Sur Csg OD	NA HOLE	7 5/8	XX			XX
	SUR CSG TD		27	XX			XX
	SUR CSG WT		17.7	XX			XX
	TOP OF CMT		0	XX			XX
	ACTUAL			XX			XX
	CACULATED		10SX	XX			XX
	PROD CSG OD	6 1/4	4 1/2	XX			XX
	PROD CSG TD		1357	XX			XX
	PROD CSG WT		9.5	XX			XX
	TOP OF CMT		716	XX	XX	XX	XX
FORMATION TOP	ACTUAL		EST		XX	XX	
GALLUP <del>1158</del> 972	CACULATED		75SX		XX	XX	
	PERF TOP		1303		XX	XX	
	PERF BOTTOM		1310		XX	XX	
	PACKER				XX	XX	
	TYPE OF PLUG				XX	XX	
	CIBP & CMT				XX	XX	
	CMT				XX	XX	

### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE TOO H W/TUBING IF ANY, PICK UP WORK STRING, CIRC HOLE  
 SPOT 23 SX PLUG @ <sup>1022 872</sup>~~1208-916~~ WOC TAG, FILL AS REQUIRED,  
 PERF @ 77' CIRC CEMENT TO SURFACE, EST 17 SX  
 CUT OFF WELL HEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS  
 Close pits according to guidelines: Clean and level location





(SUBMIT IN TRIPLICATE)

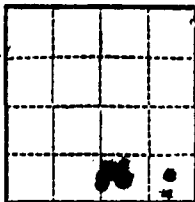
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_

Reservation \_\_\_\_\_

Allottee Navajo Tribal

Lease No. 14-00-400-3010



SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

June 17,

19 63

Well No. 6 is located 440 ft. from S line and 440 ft. from E line of Sec. 35  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Unadorned Gallup San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5103 ft. (est.)

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 6 to around 1370' to test Gallup formation.

Our casing program is as follows:

- 20' - 7-5/8" 17.75 Spiral Weld Casing - to be cemented with 10 sacks regular cement.
- 1370' - 4-1/2" 9.50 J-55 Casing - to be cemented with 75 sacks regular cement w/45 gal and 250 galiscite and 25 sacks regular w/25 calcium chloride.

ILLEGIBLE

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY

Address Box 38

Hobbs, New Mexico

By J. W. George  
Title Assistant District Superintendent

## NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

## SECTION A.

Date June 17, 1963

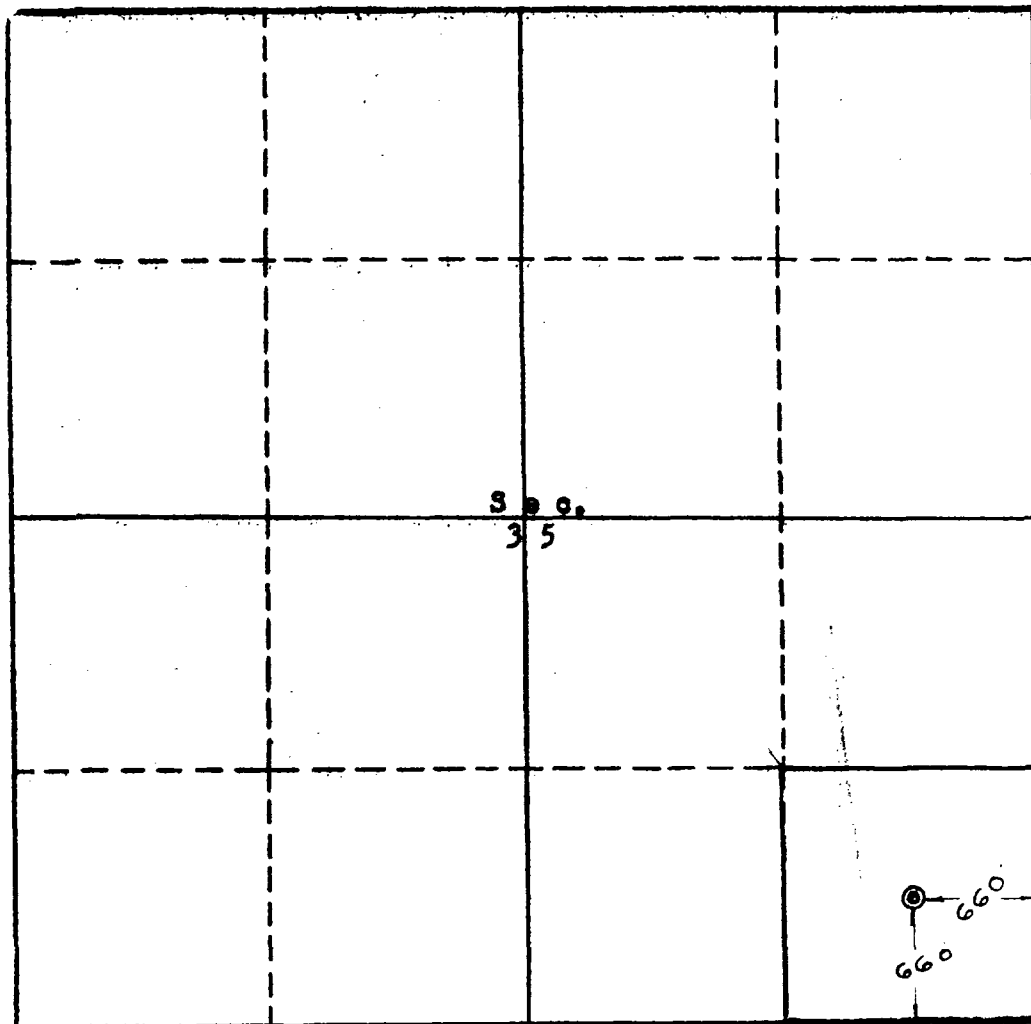
Operator Skelly Oil Company Lease Navajo NPM  
 Well No. 6 Unit Letter P Section 35 Township 32 North Range 17 West NMPM  
 Located 660 Feet From South Line, 660 Feet From East Line  
 County San Juan G. L. Elevation 5405 Dedicated Acreage 40 Acres  
 Name of Producing Formation Gallup Pool Undesignated Gallup

1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes \_\_\_\_\_ No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_. If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

## SECTION B.



RECEIVED

JUN 19 1963

OIL CON. COM.  
DIST. 3

This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY  
(OPERATOR)

*J. W. George*  
(REPRESENTATIVE)

Box 38, Hobbs, New Mexico

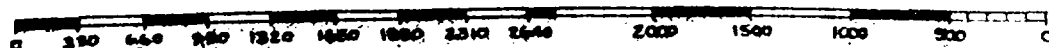
(ADDRESS)

This is to certify that the well location shown on the plat in Section B was plotted from field notes of actual surveys made by me or under my supervision and that the same are true and correct to the best of my knowledge and belief.

Date Surveyed June 15, 1963

**Four States Engineering Co.**  
FARMINGTON, NEW MEXICO

*Emmett E. C. [Signature]*  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602

(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency .....

Navajo - Wto

Allottee Mountain Tribal

Lease No. 14-22-402-2540

Sec. 35	
	16'

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	JUL 22 1963
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	Perforating & Fracturing	XX

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Navajo, New Mexico July 19, 1963

Well No. 6 is located 440 ft. from S line and 440 ft. from E line of sec. 35

SE/4 SE/4 Sec. 35 32-N 17-W N.M.P.M.  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)

Undesignated Gallup San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5400 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Well spudded June 18, 1963. Set 7-5/8" OD casing at 27' and cemented with 16 sacks by hand. W.O.G. 24 hrs. Drilled to 1180'.

LOG NO. 1 - 1180 - 1200' - Recovered 20'

- Top - 2' - Broken sand and shale
- Next - 8' - Dark gray shale
- Next - 3' - Sandy shale
- Next - 4' - Gray medium sand, hard and tight, No shows
- Next - 1' - Black shale, slightly sandy
- Next - 1' - Sandy shale
- Last - 1' - Medium gray silty sand

Drilled from 1200' to 1307'.

(See Reverse Side)

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 790

Navajo, New Mexico

By (ORIGINAL SIGNED) H. E. Asb

Title Dist. Supt.

ILLEGIBLE

NUMBER OF COPIES RECEIVED		
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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
PRODUCTION OFFICE		
OPERATOR		

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - ~~UNDESIGNATED~~ ALLOWABLE

# ILLEGIBLE

New Well  
~~RECOMPLETION~~

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farlington, New Mexico  
(Place)

July 3, 1963  
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Shelly Oil Company  
(Company or Operator)

Navajo 7P  
(Lease)

Well No. 6, in SE  $\frac{1}{4}$ , SE  $\frac{1}{4}$ ,

P, Sec. 35, T. 32N, R. 17W, NMPM, Undesignated Gallup Pool

San Juan

County. Date Spudded 6-18-63 Date Drilling Completed 6-22-63

Please indicate location:

Elevation 5398' RL Total Depth 1360' PBD 1335'

Top Oil/Gas Pay 1303 Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1303-1310'

Open Hole — Depth — Casing Shoe 1357' Depth 1295' Tubing

OIL WELL TEST -

Natural Prod. Test: — bbls. oil, — bbls water in — hrs, — min. Size —

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 132 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size —

GAS WELL TEST -

Natural Prod. Test: — MCF/Day; Hours flowed — Choke Size —

Method of Testing (pitot, back pressure, etc.): —

Test After Acid or Fracture Treatment: — MCF/Day; Hours flowed —

Choke Size — Method of Testing: —

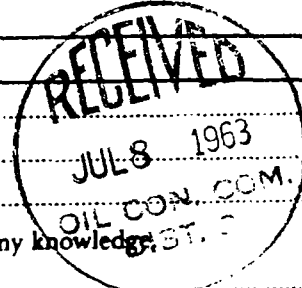
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated with 30,860 gals. lease oil & 30,000# sand

Casing — Tubing — Date first new June 30, 1963  
Press. — Press. — oil run to tanks

Oil Transporter Midwood Corporation

Gas Transporter —

Remarks: Well pumped 132 barrels in 24 hours.



I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUL 8 1963, 19.

SKELLY OIL COMPANY

(Company or Operator)

By: S. A. Shickling  
(Signature)

Title Area Foreman

Send Communications regarding well to:

Name Shelly Oil Company

Box 720 Hobbs, New Mexico

OIL CONSERVATION COMMISSION

Original Signed By

By: A. R. KENDRICK

Title PETROLEUM ENGINEER DIST. NO. 3

DEVIATION AFFIDAVIT

Date July 3, 1963

New Mexico Oil Conservation Commission

1600 Rio Brazos Road

Astec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

E. A. Strickling, Jr. of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Area Foreman and is fully acquainted with the facts as set forth herein.

That during the months of June 1963, Scott Bros. Drilling Company ran the following surveys for Skelly Oil Company on their Navajo WPA lease, Well No. 6 in SE 1/4 of SE 1/4 of Section 35-32N-17W NM, Undesignated Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

Depth In

Angle in Degrees

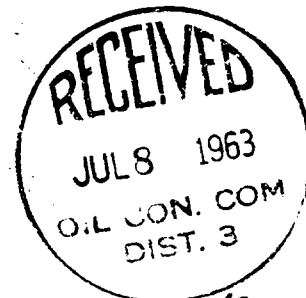
Depth In

Angle in Degrees

500'  
1000'

3/4  
1-3/4

ILLEGIBLE



Subscribed and sworn to before me this 3 day of July 19 63

James W. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

E. A. Strickling, Jr.  
Name

Area Foreman  
Position

Box 730, Hobbs, New Mexico  
Address

NUMBER OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/>
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**

(Rev. 7-60)

*B21*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Nevada 770</b>		Well No. <b>6</b>	
Unit Letter <b>P</b>	Section <b>28</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Undergrounded Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>C</b>	Section <b>24</b>	Township <b>32N</b>	Range <b>17W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Maroon Corporation</b>				Address (give address to which approved copy of this form is to be sent)  <b>330 Petroleum Building, Dallas, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection**

**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)



Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 3 day of July, 19 63.

**OIL CONSERVATION COMMISSION**

Approved by  
**Original Signed By**  
**A. R. KENDRICK**

Title  
**PETROLEUM ENGINEER DIST. NO. 3**

Date  
**JUL 8 1963**

By  
*J. A. Strickling, Jr.*  
 Title  
**Area Foreman**

Company  
**SEELLY OIL COMPANY**

Address  
**Box 710, Hobbs, New Mexico**

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
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U.S.S.P.	
LAND OFFICE	
TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/>
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

B.T.

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #70</b>		Well No. <b>6</b>	
Unit Letter <b>P</b>	Section <b>35</b>	Township <b>30N</b>	Range <b>17W</b>		County <b>San Juan</b>		
Pool <b>Mary Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>C</b>	Section <b>24</b>	Township <b>30N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1960, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection.**

**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☒ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

Remarks

**Oil transporter to be changed effective August 1, 1963.**



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 31 day of July, 1963.

**OIL CONSERVATION COMMISSION**

Approved by

**Original Signed By**  
**A. R. KENDRICK**

Title

**PETROLEUM ENGINEER DIST NO 3**

Date

**JUL 31 1963**

By

Title

**Assistant District Superintendent**

Company

**Shelly Oil Company**

Address

**Box 730, Hobbs, New Mexico**

DISTRIBUTION	
SANTA FE	
FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

FORM C-110  
(Rev. 7-60)

**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

B.T.

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo WPA</b>		Well No. <b>6</b>	
Unit Letter <b>WPA</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Mary Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>WPA</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1588 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> <b>None</b>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

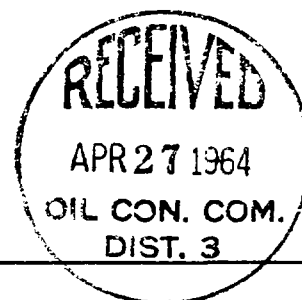
If gas is not being sold, give reasons and also explain its present disposition:

**Waiting on gas connection - Gas being vented.**

REASON(S) FOR FILING (please check proper box)

New Well ..... ☐  
Change in Transporter (check one)  
Oil ..... ☒ Dry Gas ..... ☐  
Casing head gas . ☐ Condensate . ☐

Change in Ownership ..... ☐  
Other (explain below)



Remarks

**Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.**

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **24th** day of **April**, 19**64**

OIL CONSERVATION COMMISSION		By <b>Charles J. Love</b>	
Approved by <b>Original Signed Emery C. Arnold</b>		Title <b>Dist. Engineer</b>	
Title <b>Supervisor Dist. # 3</b>		Company <b>Skelly Oil Company</b>	
Date <b>APR 27 1964</b>		Address <b>Box 730 - Hobbs, New Mexico</b>	



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-600-2540

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Mountain Tribal

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Havaje "P"

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

Many Rocks Gallup

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

Sec. 35-32N-17W

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Shelly Oil Company

3. ADDRESS OF OPERATOR

Box 730 - Hobbs, New Mexico

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

660' FSL & 660' FHL Sec. 35 - 32-N - 17-W

14. PERMIT NO.

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

5401' DF

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Convert well to Water Injection.

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

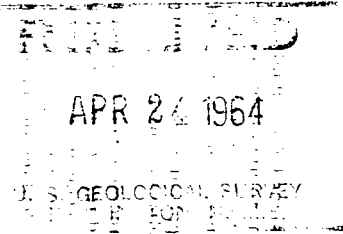
ABANDONMENT\* ☐

(NOTE: Report results of multiple completion or 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 pertinent to this work.)\*

We plan to pull the rods and tubing out of this well. We will then install water injection equipment and inject water through 4-1/2" OD casing perfor. 1303-1310' into the Gallup Formation.

This well will be a Water Injection Well for the Many Rocks Gallup Pressure Maintenance Project No. 3 in the Many Rocks Gallup Oil Pool, San Juan County, New Mexico.



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

SIGNED Original Signed  
Charles J. Love

TITLE Dist. Engineer

DATE April 23, 1964

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

APR 27 1964

\*See Instructions on Reverse Side

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FILE	/
U.S.G.S.	
LAND OFFICE	
OPERATOR	/

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease Federal <input checked="" type="checkbox"/> Indian <input type="checkbox"/>
5. State Oil & Gas Lease No. Cont. # 14-200-600-3540

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 -" (FORM C-101) FOR SUCH PROPOSALS.)	
1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <b>Injection Well</b>	7. Unit Agreement Name -----
2. Name of Operator <b>Skelly Oil Company</b>	8. Farm or Lease Name <b>Navajo "P"</b>
3. Address of Operator <b>330 So. Center-Rm. 208, Casper, Wy 82601</b>	9. Well No. <b>6</b>
4. Location of Well UNIT LETTER <b>P</b> <b>660</b> FEET FROM THE <b>S</b> LINE AND <b>660</b> FEET FROM THE <b>E</b> LINE, SECTION <b>35</b> TOWNSHIP <b>32N</b> RANGE <b>17W</b> NMPM.	10. Field and Pool, or Wildcat <b>Many Rocks=Gallup</b>
15. Elevation (Show whether DF, RT, GR, etc.) <b>5401 DF</b>	12. County <b>San Juan</b>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/> <b>7/1/73</b>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <input type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Injection to be re-initiated in 1975.

Permission is requested for continuation of TA status for at least one year.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u><i>E. C. Arnold</i></u>	TITLE <u>Area Superintendent</u>	DATE <u>10/30/74</u>
Original Signed by Eddy C. Arnold		
APPROVED BY _____	TITLE _____	DATE <u>NOV 7 1974</u>
CONDITIONS OF APPROVAL, IF ANY:		

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

Cont. 14-200-600-3450

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo "P"

9. WELL NO.

6

10. FIELD AND POOL, OR WILDCAT

Many Rocks-Gallup

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

35-T32N-R17W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

1. OIL ☐ GAS ☐ OTHER ☐ Injection well

2. NAME OF OPERATOR  
Skelly Oil Company

3. ADDRESS OF OPERATOR  
Box 3360, Casper, WY 82602

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

660' FSL & 660' FEL  
(SE/4 SE/4)

14. PERMIT NO.

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

5401' DF

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

Temporarily Abandon

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other)

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(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 pertinent to this work.)\*

A study of this lease is being made for possible recompletion in other zones  
and we request permission for continuation of the TA status for one more year.

TEMPORARY ABANDONMENT

EXPIRES

JUN 1 1977

JUN 15 1976

U.S. GEOLOGICAL SURVEY

JUN 16 1976

U.S. GEOLOGICAL SURVEY

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

SIGNED

*Ray J. Mankert*

TITLE

Area Superintendent

DATE

6/11/76

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**RECEIVED**  
OCT 17 1988

Operator <b>A.P.A. Development Corporation</b>	
Address <b>P.O. Box 215, Cortez, Colorado 81321</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
<b>DIST. 3</b>	

If change of ownership give name and address of previous owner **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "P"</b>	Well No. <b>6</b>	Pool Name, including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Navajo</b> State, Federal or Fee <b>14-20-600-3540</b>	Lease No.
Location				
Unit Letter <b>P</b> : <b>660</b> Feet From The <b>South</b> Line and <b>660</b> Feet From The <b>East</b>				
Line of Section <b>35</b> Township <b>32N</b> Range <b>17W</b> , NMPM, <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Ciniza Pipe Line, Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1887, Bloomfield, NM 87413</b>
Name of Authorized Transporter of Casingshead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<b>C 34 32N 17W</b>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Patricia B. Woosley*  
(Signature)  
**Operator**  
(Title)  
**10-12-88**  
(Date)

OIL CONSERVATION DIVISION

**OCT 17 1988**

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY *James J. Chung*  
TITLE **SUPERVISION DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

(VALLEY INSTRUCTIONS ON REVERSE SIDE)

## 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.)

OIL WELL ☐ GAS WELL ☐ OTHER ☒ **WIW**

2. NAME OF OPERATOR  
**APA Development Inc.**

3. ADDRESS OF OPERATOR  
**Box 215 Cortez CO. 81321**

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
**660 FSL & 660 FEL**  
**Sec 35 T32N R17W**

14. PERMIT NO. \_\_\_\_\_ 15. ELEVATIONS (Show whether OF, RT, OR, etc.) \_\_\_\_\_

5. LEASE DESIGNATION AND SERIAL NO.  
**14-20-600-3540**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
**Navajo**

7. UNIT AGREEMENT NAME  
**Navajo "P"**

8. FARM OR LEASE NAME  
**Navajo "P"**

9. WELL NO.  
**6**

10. FIELD AND POOL, OR WILDCAT  
**Many Rocks Galling**

11. SEC., T., R., M., OR BLE, AND SURVEY OR AREA  
**Sec 35 T32N R17W**

12. COUNTY OR PARISH  
**San Juan**

13. STATE  
**NM**

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) **WIW**PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANT ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other) \_\_\_\_\_

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

(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 pertinent to this work.

Plan to condition well back to active water injection.

**RECEIVED**  
MAR 27 1992  
OIL CON. DIV.  
DIST. 3

RECEIVED  
BLM  
92 MAR 17 PM 1:56  
019 FARMINGTON, N.M.

THIS APPROVAL EXPIRES **APR 01 1993**

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

SIGNED Pat Woolley

TITLE \_\_\_\_\_

DATE 3/13/92

(This space for Federal or State office use)

**APPROVED**

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

DATE MAR 26 1992

CONDITIONS OF APPROVAL, IF ANY:

AREA MANAGER

\*See Instructions on Reverse Side

W. A. DEVELOPMENT  
NAVAJO P. 6  
P-85-3211-1741

BEFORE THE OIL CONSERVATION COMMISSION  
OF THE STATE OF NEW MEXICO

IN THE MATTER OF THE HEARING  
CALLED BY THE OIL CONSERVATION  
COMMISSION OF NEW MEXICO FOR  
THE PURPOSE OF CONSIDERING:

CASE No. 2994  
Order No. R-2664,

APPLICATION OF SKELLY OIL COMPANY  
FOR A PRESSURE MAINTENANCE PROJECT,  
SAN JUAN COUNTY, NEW MEXICO.

ORDER OF THE COMMISSION

BY THE COMMISSION:

This cause came on for hearing at 9 o'clock a.m. on February 19, 1964, at Santa Fe, New Mexico, before Examiner Elvis A. Utz.

NOW, on this 13th day of March, 1964, the Commission, a quorum being present, having considered the testimony, the record, and the recommendations of the Examiner, and being fully advised in the premises,

FINDS:

(1) That due public notice having been given as required by law, the Commission has jurisdiction of this cause and the subject matter thereof.

(2) That the applicant, Skelly Oil Company, seeks authority to institute a pressure maintenance project in the Many Rocks-Gallup Oil Pool, San Juan County, New Mexico, by the injection of water into the Gallup (Tocito) Sandstone formation underlying its Navajo "P" and "M" Leases in Sections 25, 26, 34, 35, and 36, Township 32 North, Range 17 West, NMPM, San Juan County, New Mexico, initially through its Navajo "P" Well No. 6 located in Unit P of said Section 35.

(3) That the applicant seeks the promulgation of special rules and regulations governing the proposed project similar to the special rules and regulations governing the Many Rocks-Gallup Pressure Maintenance Project No. 1 promulgated by Order No. R-2541.

(4) That the proposed pressure maintenance project is in the interest of conservation and should result in greater ultimate recovery of oil, thereby preventing waste.

(5) That the proposed special rules and regulations should be adopted in order to prevent waste and protect correlative rights.

IT IS THEREFORE ORDERED:

(1) That the applicant, Skelly Oil Company, is hereby authorized to institute a pressure maintenance project designated the Many Rocks-Gallup Pressure Maintenance Project No. 3 in the Many Rocks-Gallup Oil Pool, San Juan County, New Mexico, by the injection of water into the Gallup (Tocito) Sandstone formation initially through its Navajo "P" Well No. 6 located in Unit P of Section 35, Township 32 North, Range 17 West, NMPM, San Juan County, New Mexico.

(2) That special rules and regulations governing the Many Rocks-Gallup Pressure Maintenance Project No. 3, San Juan County, New Mexico, are hereby promulgated as follows:

SPECIAL RULES AND REGULATIONS  
FOR THE  
MANY ROCKS-GALLUP PRESSURE MAINTENANCE PROJECT NO. 3

RULE 1. The project area of the Many Rocks-Gallup Pressure Maintenance Project No. 3, hereinafter referred to as the Project, shall comprise the following-described area:

SAN JUAN COUNTY, NEW MEXICO  
TOWNSHIP 32 NORTH, RANGE 17 WEST, NMPM  
Section 26: W/2 SW/4  
Section 34: NE/4, NE/4 NW/4, and N/2 SE/4  
Section 35: NW/4 and S/2

RULE 2. The allowable for the Project shall be the sum of the allowables of the several wells within the project area, including those wells which are shut-in, curtailed, or used as injection wells. Allowables for all wells shall be determined in a manner hereinafter prescribed.

RULE 3. Allowables for injection wells may be transferred to producing wells within the project area, as may the allowables for producing wells which, in the interest of more efficient operation of the Project, are shut-in or curtailed because of high gas-oil ratio, pressure regulation, control of pattern or sweep efficiencies, or to observe changes in pressures or changes in characteristics of reservoir liquids or progress of sweep.

RULE 4. The allowable assigned to any well which is shut-in or which is curtailed in accordance with the provisions of Rule 3, which allowable is to be transferred to any well or wells in the project area for production, shall in no event be greater than its ability to produce during the test prescribed by Rule 6, below, or greater than the current top unit allowable for the pool during the month of transfer, whichever is less.

RULE 5. The allowable assigned to any injection well on a 40-acre proration unit shall be top unit allowable for the pool.

RULE 6. The allowable assigned to any well which is shut-in or curtailed in accordance with Rule 3 shall be determined by a 24-hour test at a stabilized rate of production which shall be the final 24-hour period of a 72-hour test throughout which the well should be produced in the same manner and at a constant rate. The daily tolerance limitation set forth in Rule 502 I (a) of the General Rules and Regulations and any limiting gas-oil ratio for the pool shall be waived during such tests. The project operator shall notify the Commission and all offset operators in writing of the exact time and date such tests are to be conducted. The Commission and representatives of the offset operators may witness the tests.

RULE 7. The allowable assigned to each producing well in the Project shall be equal to the well's ability to produce or to top unit allowable for the pool, whichever is less. Each producing well shall be subject to the limiting gas-oil ratio (2,000 to 1) for the pool, except that any well or wells within the project area producing with a gas-oil ratio in excess of 2,000 cubic feet of gas per barrel of oil may be produced on a "net" gas-oil ratio basis, which net gas-oil ratio shall be determined by applying credit for daily average gas injected, if any, into the pool within the project area to such high gas-oil ratio well. The daily adjusted oil allowable for any well receiving gas injection credit shall be determined in accordance with the following formula:

$$A_{adj} = \frac{TUA \times F_a \times 2,000}{\frac{P_g - I_g}{P_o}}$$

where:

$A_{adj}$  = the well's daily adjusted allowable

TUA = top unit allowable for the pool

$F_a$  = the well's acreage factor

$P_g$  = average daily volume of gas produced by the well during the preceding month, cubic feet

$I_g$  = the well's allocated share of the daily average gas injected during the preceding month, cubic feet

$P_o$  = average daily volume of oil produced by the well during the preceding month, barrels



In no event shall the amount of injected gas being credited to a well be such as to cause the net gas-oil ratio,  $\frac{P_g - I_g}{P_o}$ , to be less than 2,000 cubic feet of gas per barrel of oil produced.

**RULE 8.** Credit for daily average net water injected into the pool through any injection well located within the project area may be converted to its gas equivalent and applied to any well producing with a gas-oil ratio in excess of two thousand cubic feet of gas per barrel of oil. Total credit for net water injected in the project area shall be the gas equivalent volume of the daily average net water injected during a one-month period. The daily average gas equivalent of net water injected shall be computed in accordance with the following formula:

$$E_g = (V_w \text{ inj} - V_w \text{ prod}) \times 5.61 \times \frac{P_a}{15.025} \times \frac{520^\circ}{T_r} \times \frac{1}{Z}$$

where:

- $E_g$  = Average daily gas equivalent of net water injected, cubic feet
- $V_w \text{ inj}$  = Average daily volume of water injected, barrels
- $V_w \text{ prod}$  = Average daily volume of water produced, barrels
- 5.61 = Cubic foot equivalent of one barrel of water
- $P_a$  = Average reservoir pressure at mid-point of the pay-zones of the pool in the project area, psig + 12.01, as determined from most recent survey
- 15.025 = Pressure base, psi
- $520^\circ$  = Temperature base of  $60^\circ\text{F}$  expressed as absolute temperature
- $T_r$  = Reservoir temperature of  $92^\circ\text{F}$  expressed as absolute temperature ( $552^\circ\text{R}$ )
- $Z$  = Compressibility factor from analysis of gas from the pool at average reservoir pressure,  $P_a$ , interpolated from compressibility tabulation below:

Reservoir Pressure	Z	Reservoir Pressure	Z	Reservoir Pressure	Z
50	.9725	300	.8325	550	.6560
100	.9465	350	.8030	600	.6135
150	.9215	400	.7710	650	.5655
200	.8885	450	.7220	700	.5220
250	.8600	500	.6900	750	.4630
				800	.3935

RULE 9. Each month the project operator shall, within three days after the normal unit allowable for Northwest New Mexico has been established, submit to the Commission a Pressure Maintenance Project Operator's Report, on a form prescribed by the Commission, outlining thereon the data required, and requesting allowables for each of the several wells in the Project as well as the total Project allowable. The aforesaid Pressure Maintenance Project Operator's Report shall be filed in lieu of Form C-120 for the Project.

RULE 10. The Commission shall, upon review of the report and after any adjustments deemed necessary, calculate the allowable for each well in the Project for the next succeeding month in accordance with these rules. The sum of the allowables so calculated shall be assigned to the Project and may be produced from the wells in the Project in any proportion.

RULE 11. The conversion of producing wells to injection, the drilling of additional wells for injection, and expansion of the project area shall be accomplished only after approval of the same by the Secretary-Director of the Commission. To obtain such approval, the project operator shall file proper application with the Commission, which application, if it seeks authorization to convert additional wells to injection or to drill additional injection wells shall be filed in accordance with Commission Rule 701-B and shall be accompanied by a statement that all offset operators to the proposed injection well have been furnished a complete copy of the application and the date of notification.

The Secretary-Director may approve the proposed injection well if, within 15 days after receiving the application, no objection to the proposal is received. The Secretary-Director may grant immediate approval, provided waivers of objection are received from all offset operators and from the State Engineer.

Expansion of the project area may be approved by the Secretary-Director of the Commission administratively when good cause is shown therefor.

-6-

CASE No. 2994

Order No. R-2664

(3) That jurisdiction of this cause is retained for the entry of such further orders as the Commission may deem necessary.

DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.

STATE OF NEW MEXICO  
OIL CONSERVATION COMMISSION

JACK M. CAMPBELL, Chairman

E. S. WALKER, Member

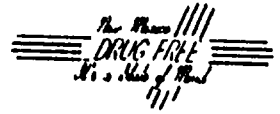
A. L. PORTER, Jr., Member & Secretary

S E A L

esr/



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE



BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

December 4, 1992

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells

Navajo AA #4, E-17-32N-17W  
Navajo AA #13, B-20-32N-17W  
Navajo #11, E-27-32N-17W  
Navajo #6, K-27-32N-17W  
Navajo #3, O-27-32N-17W  
Navajo #12, I-28-32N-17W  
~~Navajo P #6, J-35-32N-17W~~

Navajo M #2, K-33-32N-17W  
Navajo M #7, B-34-32N-17W  
Navajo #10, J-27-32N-17W  
Navajo P #11, D-35-32N-17W  
Navajo P #9, F-35-32N-17W  
Navajo P #7, J-35-32N-17W

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by April 1, 1992 and work completed by December 31, 1993.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File  
David Catanach-UIC Director  
~~Well File~~  
George Robin-EPA



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DIVISION  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

April 13, 1993

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells

Navajo AA #4, E-17-32N-17W	Navajo AA #13, B-20-32N-17W
Navajo #11, E-27-32N-17W	Navajo #10, J-27-32N-17W
Navajo #6, K-27-32N-17W	Navajo #3, O-27-32N-17W
Navajo #12, I-28-32N-17W	Navajo M #2, K-33-32N-17W
Navajo M #7, B-34-32N-17W	Navajo P #11, D-35-32N-17W
Navajo P #9, F-35-32N-17W	Navajo P #7, J-35-32N-17W
Navajo P #6, P-35-32N-17W	

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated. You are required to file for a permit to inject under Rule 701 prior to any injection.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by June 1, 1993 and work completed by June 1, 1994.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File  
David Catanach-UIC Director  
Well File  
David Holguin-EPA

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 WIW

2. Name of Operator  
A.P.A. Development, Inc.

3. Address and Telephone No.  
P.O. Box 215, Cortez, CO 81321 303-565-2458

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
660' FSL + 660' FEL, Sec. 35, T32N R17W

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

5. Lease Designation and Serial No.  
14-20-600-3540

6. If Indian, Allottee or Tribe Name  
NAVAJO

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
NAVAJO #6

9. API Well No.  
3004511520051

10. Field and Pool, or Exploratory Area  
MANY ROCKS

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 \_\_\_\_\_
- ☐ 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 all is not reasonably drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Plan to T.A. until well can be  
conditioned back to water injection.

RECEIVED

APR 9 1993

OIL CON. DIV  
DIST. 3

THIS APPROVAL EXPIRES APR 01 1994

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

RECEIVED  
BLM  
APR 29 11:13:38  
OIL CON. DIV, NM

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

Signed Pat W. [Signature]  
(This space for Federal or State office use)

Title \_\_\_\_\_

Date 3/29/93

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_

APPROVED  
AS AMENDED

APR 07 1993

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

DISTRICT MANAGER

\*See Instruction on Reverse Side

NMOCD

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA  
1235 LA PLATA HIGHWAY  
FARMINGTON, NEW MEXICO 87401

CONDITIONS OF APPROVAL:

This Temporary Abandonment approval is contingent upon conducting a casing integrity test by JUL 01 1993. Mark Kelly with the Farmington Office is to be notified at least 48 hours prior to conducting the casing integrity test (505-599-8907). If the casing test fails, you will be required to submit your plans to repair the casing or plug and abandon the well.

Office Hours: 7:45 a.m. to 4:30 p.m.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

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 070 FARMINGTON, NM

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other

2. Name of Operator

3. Address and Telephone No.

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

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

Navajo "P"

8. Well Name and No.

6

9. API Well No.

30045711520051

10. Field and Pool, or Exploratory Area

Many Rocks (A)

11. County or Parish, State

San Juan N.M.

12. CHECK APPROPRIATE BOX(es) 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

- ☐ 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 (Give 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.)

Plan to plug well as follows:

1. equalize cement plug from 1335' to 1253'
2. Pick up to 1252' circulate conditioned fluid to 50' of surface.
3. Circulate cement from 50' to surface.
4. Circulate cement from 50' to surface between 4 1/2" and 7 7/8" casings
5. Weld on dry hole marker and remediate surface location.

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

Signed Patricia Weoley

Title SEE ATTACHED FOR  
ONE OF APPROVAL

Date 10/14/94

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any: \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

APPROVED

OCT 25 1994

MANAGER

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

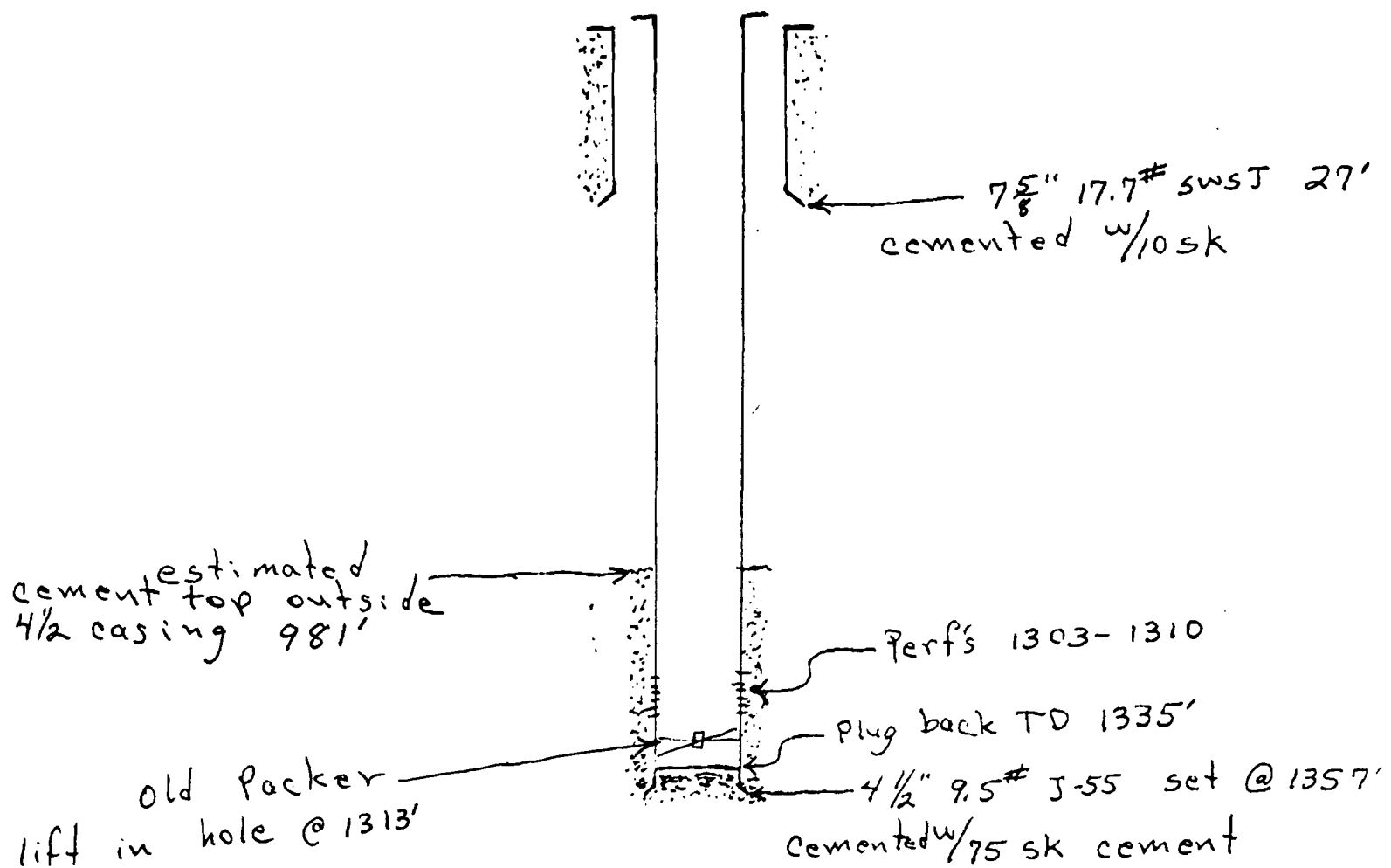
\*See Instruction on Reverse Side



Navajo P-6

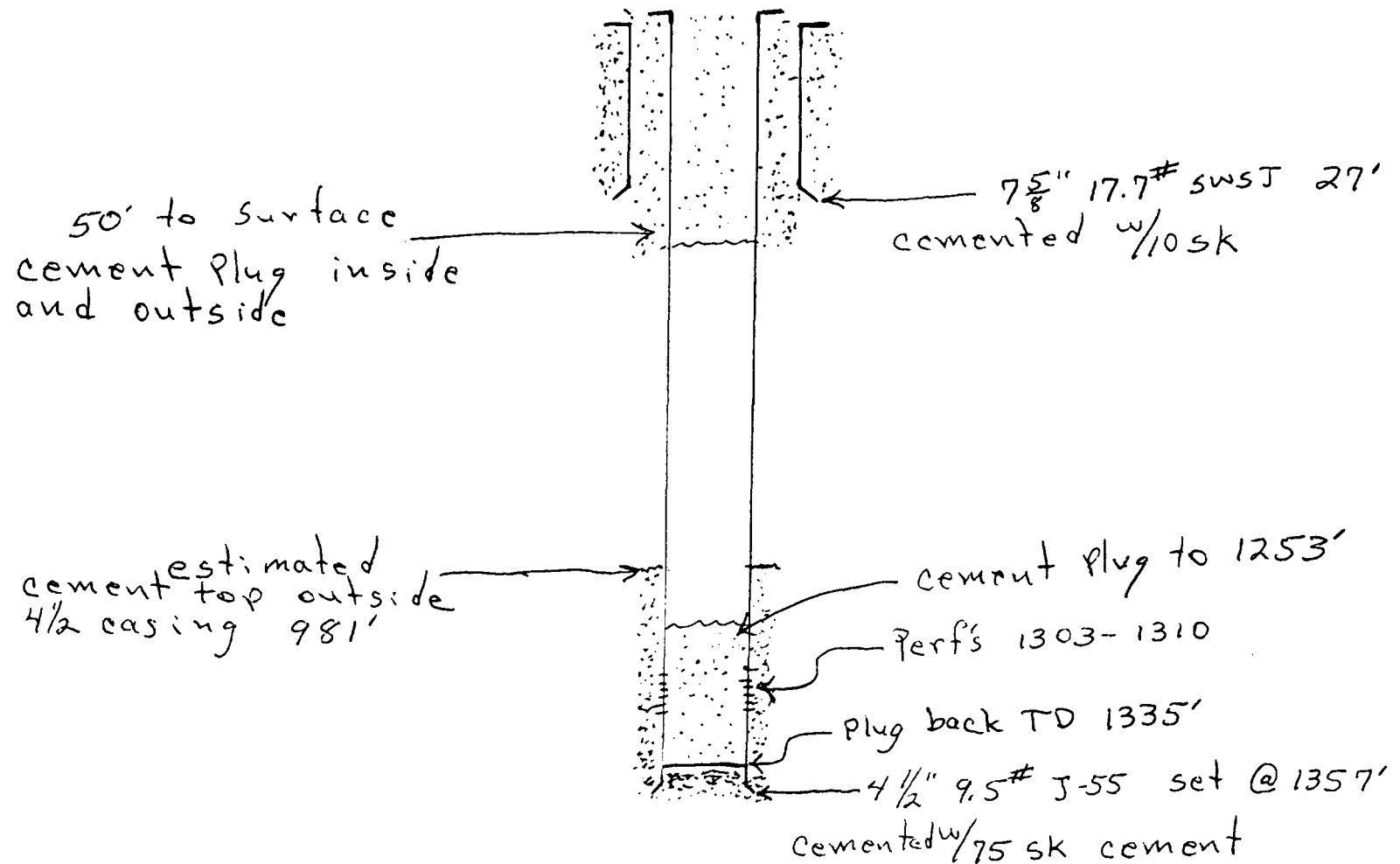
Lease # 14-20-600-3540

existing Conditions



Navajo P-6

Lease # 14-20-600-3540



**UNITED STATES DEPARTMENT OF THE INTERIOR**

**BUREAU OF LAND MANAGEMENT  
FARMINGTON DISTRICT OFFICE**

1235 La Plata Highway  
Farmington, New Mexico 87401

Attachment to Notice of

Re: Permanent Abandonment

Intention to Abandon

Well: **6 Navajo P**

**CONDITIONS OF APPROVAL**

1. Plugging operations authorized are subject to the attached "General Requirements for Permanent Abandonment of Wells on Federal and Indian Leases."

2. **Mike Flaniken** with the Farmington Office is to be notified at least 24 hours before the plugging operations commence (505) 599-8907.

3. The following modifications to your plugging program are to be made (when applicable):

1. **Tag top of cement plug @ 1253'.**

2. Spot a cement plug from 1016' to 916' inside the casing plus 50 linear feet excess. (top of Gallup @ 966')

3. Extend surface plug from 77' to the surface on the inside and outside of the casing. (surface casing @ 27')

**Note:** The above modifications are minimum standards. It is acceptable to pump additional cement and combine plugs.

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

5. Lease Designation and Serial No.

1420-600-3540

6. If Indian, Allottee or Tribe Name

NAVAJO TRIGAL

7. If Unit or CA, Agreement Designation

8. Well Name and No.

NO 6 NAVAJO P,

9. API Well No.

3004511152

10. Field and Pool, or Exploratory Area

MARY ROCKS

11. County or Parish, State

SAN JUAN NM

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well

☐ Gas Well

☒ Other

INS Well

2. Name of Operator

APA DRU - INC

3. Address and Telephone No.

PO Box 1093 - Shiprock NM 87420

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

NO 6 NAVAJO P 660 FSL & 660 FFL S2435

LEASE 1420600-3548-35-T32N, R17W

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

☐ 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.)

NO 6 NAVAJO P A Key Line Well for  
Repressuring The Lease latter part of program  
about 12 mo

RECEIVED  
JUN - 3 1997  
OIL CON. DIV.  
DIST. 3

97 JUN - 2 PM 3:00  
OIL CON. DIV. NM

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

Signed William C. Brown

Title Pres

Date 6-1-97

(This space for Federal or State office use)

Approved by AS/ Duane W. Spencer  
Conditions of Approval, if any:

Title

Date JUN - 4 1997

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

NAOCO

Heaving plug—Material \_\_\_\_\_ Length \_\_\_\_\_ Depth set \_\_\_\_\_  
 Adapters—Material \_\_\_\_\_ Size \_\_\_\_\_

### SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Tracked through 4-1/2" OD casing parts. 1307-1316' with 30,000 gallons of tank oil and 30,000 lbs. of dynamite.						

### TOOLS USED

Rotary tools were used from \_\_\_\_\_ feet to **1340** feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Cable tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

### DATES

\_\_\_\_\_, 19\_\_\_\_ Put to producing \_\_\_\_\_, 19\_\_\_\_ **July 1, 63**  
 The production for the first 24 hours was **132** barrels of fluid of which **99.9%** was oil; \_\_\_\_\_%  
 emulsion; \_\_\_\_\_% water; and **.1**% sediment. Gravity, °Bé. **41.4**  
 If gas well, cu. ft. per 24 hours \_\_\_\_\_ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_  
 Rock pressure, lbs. per sq. in. \_\_\_\_\_

### EMPLOYEES

\_\_\_\_\_, Driller \_\_\_\_\_, Driller  
**Odom**, Driller \_\_\_\_\_, Driller  
**Johnston**, Driller \_\_\_\_\_, Driller

### FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	974	974	Sand & shale
974	1158	184	Sand & shale - Top Middle Gallup 974'
1158	1301	143	Sand & shale - Top Lower Gallup 1158'
1301	1314	13	Sand & shale - Top Tecite 1301'
1314	1340	46	Sand & shale - Top Samastee 1314'
	1340	Total Depth	
	1335	Plugged Back Total Depth	
Geological Tops by Schlumberger Induction Gamma Ray Log.			
<b>Core No. 1 - 1158 - 1208' - Recovered 20'</b> Top - 2' - Brown sand and shale Next - 8' - Dark gray shale Next - 3' - Sandy shale Next - 4' - Black shale, slightly sandy Next - 1' - Sandy shale Last - 1' - Medium gray silty sand			
<b>Core No. 2 - 1307 - 1327' Recovered 18'</b> Top - 5'-6" - Medium gray sandstone, oil saturated Next - 13'-0" - Sandy shale			
FROM—	TO—	TOTAL FEET	FORMATION

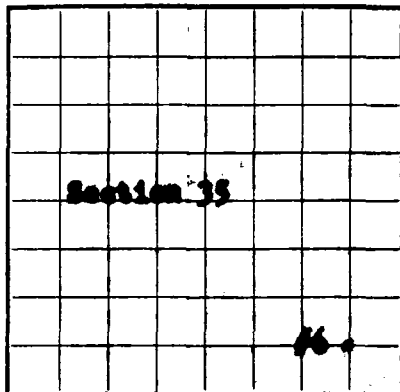
FORMATION RECORD—Continued

16-43094-6

ILLEGIBLE

RECEIVED

JUL 23 1963

OIL CON. COM.  
DIST. 3Form approved  
Budget Bureau No. 42-R355.4U. S. LAND OFFICE Window Rock  
SERIAL NUMBER 14-20-600-3540  
LEASE OR PERMIT TO PROSPECT \_\_\_\_\_

LOCATE WELL CORRECTLY

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## LOG OF OIL OR GAS WELL

Company Shelly Oil Company Address Box 730 - Hobbs, New Mexico  
 Lessor or Tract Navajo Field Undesignated Gallup State New Mexico  
 Well No. 6 Sec. 35 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
 Location 660 ft. N. of 3 Line and 660 ft. E. of 2 Line of Section 35 Elevation 5461  
(Derrick floor relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon  
 so far as can be determined from all available records.

Signed \_\_\_\_\_

(Initials) H. E. AubDate July 19, 1963Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

Commenced drilling June 18, 1963 Finished drilling June 22, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1303 to 1310' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
7-5/8"	27	10							
4-1/2"	19.75	7.5							
HISTORY OF OIL OR GAS WELL									

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8"	27'	10	By Hand	---	---
4-1/2"	19.75'	7.5	Pump & Plug	---	---

ILLEGIBLE

(May 1964)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

**14-20-600-2540**

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

**Mountain Tribal**

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

**Kavahe "P"**

9. WELL NO.

**6**

10. FIELD AND POOL, OR WILDCAT

**Many Rocks Gallup**

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

**Sec. 35-32N-17W**

14. PERMIT NO.

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

**5401' DF**

12. COUNTY OR PARISH

**San Juan**

13. STATE

**New Mexico**

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

☐

PULL OR ALTER CASING

☐

FRACTURE TREAT

☐

MULTIPLE COMPLETE

☐

SHOOT OR ACIDIZE

☐

ABANDON\*

☐

REPAIR WELL

☐

CHANGE PLANS

☐

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐

REPAIRING WELL

☐

FRACTURE TREATMENT

☐

ALTERING CASING

☐

SHOOTING OR ACIDIZING

☐

ABANDONMENT\*

☐

(Other)

**Well converted to Water Injection**

(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 pertinent to this work.)\*

Moved in and rigged up pulling unit. Pulled rods and tubing. Ran 2" tubing and set packer at 1268'. Installed Water Injection Equipment and started injecting water into the Gallup Formation through 4-1/2" CD casing perfs. 1303-1310' on May 15, 1964.

This well is a Water Injection Well for the Many Rocks Gallup Pressure Maintenance Project No. 3 in the Many Rocks Gallup Oil Pool.

Work performed - May 12 thru May 15, 1964.

MAY 25 1964

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N.M.

MAY 26 1964

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

SIGNED

(SIGNED) **H. E. ASS**

TITLE

**Dist. Supt.**

DATE

**May 20, 1964**

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

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TRANSPORTER	OIL 1
	GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-  
Effective 1-1-65

I.

Operator Getty Oil Company	
Address Box 3360, Casper, Wyoming 82602	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recom. Action <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 6	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-200-600-3540
Location				
Unit Letter P	: 660	Feet From The South	Line and 660	Feet From The East
Line of Section 35	Township 32N	Range 17W	, NMPM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Shell Pipeline Corp.	Box 1588, Farmington, NM					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Ege. 17W	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.
Date Spudded	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.					
Elevations (DF, RKB, RT, CR, 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 Tanks	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/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

*Roy J. Maxwell, Jr.*  
(Signature)

Area Superintendent

(Title)

2/4/77

(Date)

OIL CONSERVATION COMMISSION

FEB 10 1977

APPROVED \_\_\_\_\_, 19

ORIGINAL SIGNED BY N. E. MAXWELL, JR.

BY PETROLEUM ENGINEER DIST. NO. 3

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 1111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



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	GAS
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PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) <i>Any</i>	

If change of ownership give name and address of previous owner  
Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 6	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 87401
Location Unit Letter <u>P</u> ; <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>35</u> Township <u>32N</u> Range <u>17</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, N.M. 87401	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34
	Twp. 32N	Pge. 17W
	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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

*James P. Hooley*  
(Signature)  
CO. Operator  
(Title)  
9-11-79  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19\_\_\_\_  
Original Signed by A. R. Kendrick  
BY \_\_\_\_\_  
SUPERVISOR DISTRICT # 3  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1106.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I. Operator  
BayStar Petroleum Corporation  
Address  
P. O. Box 2975, Corpus Christi, Texas 78403  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
Injection Well

If change of ownership give name and address of previous owner  
WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 6	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location Unit Letter <u>P</u> ; <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <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)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
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:

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 8, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 13 1985  
BY [Signature]  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.



APA Development  
NAVAJO P#7.  
45-11162  
J-35-32N-17W  
1980S 1980E

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 *APA Development Corp.*

*% NMOCO*

3. Address and Telephone No.

*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

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

*35-32N-17W 1980/52 1980/E*

5. Lease Designation and Serial No.

*14-20-600-3540*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*7 Navajo P*

9. API Well No.

*30045 1116 2*

10. Field and Pool, or Exploratory Area

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

☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOCO Contract Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_

Date *8/17/00*

Conditions of approval, if any:

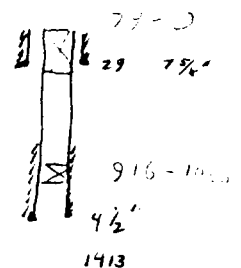
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

API NUMBER	30-045-11162	30-045-11162	30-045-11162	30-045-11162
OPERATOR NAME	APA DEVELOPMENT CORP	WELL NUMBER	7	
PROPERTY NAME	NAVAJO P			
SECTION 35	TOWNSHIP 32N	RANGE	17W	
FOOTAGE	1980 FSL 1980 FEL UL "J"			
	Sur Csg OD NA HOLE	7 5/8	XX	XX
	SUR CSG TD	29	XX	XX
	SUR CSG WT	17.7	XX	XX
	TOP OF CMT	0	XX	XX
	ACTUAL		XX	XX
	CACULATED	8 SX	XX	XX
	PROD CSG OD 6 1/4	4.5??	XX	XX
	PROD CSG TD	1413	XX	XX
	PROD CSG WT	9.5	XX	XX
	TOP OF CMT	772	XX	XX
FORMATION TOP	ACTUAL	EST	XX	XX
GALLUP 1016	CACULATED	75SX	XX	XX
	PERF TOP	1353	XX	XX
	PERF BOTTOM	1361	XX	XX
	PACKER		XX	XX
	TYPE OF PLUG		XX	XX
	CIBP & CMT		XX	XX
	CMT		XX	XX

### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOO H W/TUBING, PICK UP WORK STRING, CIRC HOLE  
 SPOT 14 SX PLUG 916-1066 WOC TAG, FILL AS REQUIRED  
 PERF @ 79' CIRC CEMENT TO SURFACE, EST 17 SX  
 CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS  
 Close pits according to guidelines: Clean and level location





# NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

### SECTION A.

Operator Shelly Oil Company Date June 26, 1963  
 Well No. 7 Unit Letter J Section 35 Township 32 North Range 17 West NMMPM  
 Located 1980 Feet From South Line, 1980 Feet From East Line  
 County San Juan G. L. Elevation 5464 Dedicated Acreage 40 Acres  
 Name of Producing Formation Gallup Pool Undesignated Gallup

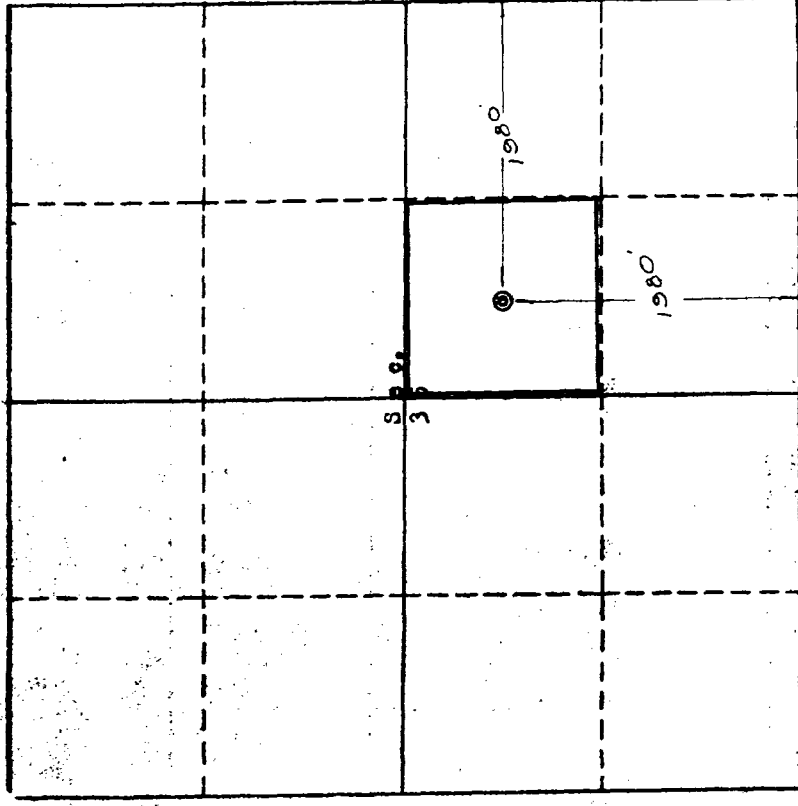
1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No  
 2. If the answer to question One is "No," have the interests of all the owners been consolidated by communication agreement or otherwise? Yes No If answer is "Yes," Type of Consolidation

3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

### SECTION B.



RECEIVED  
JUN 28 1963  
OIL CON. COM.  
DIST. 3

This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SHELLY OIL COMPANY  
(OPERATOR)

*J. M. George*  
(REPRESENTATIVE)

Box 730, Hobbs, New Mexico

THIS TO CERTIFY THAT THE WELL LOCATED ON THE PLAT IN SECTION B WAS PLANTED BY ME OR UNDER MY SUPERVISION AND THAT THE SAME IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Date Surveyed June 25, 1963  
 Four States Engineering Co.  
 FARMINGTON, NEW MEXICO

*Conrad V. Toth*  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602





(SUBMIT IN TRIPLICATE)

Indian Agency

840. 15	77
---------	----

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

Navajo Res.

Allottee Mountain Shale

Lease No. 14-30-600-3440

## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	<input checked="" type="checkbox"/>
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	Perforate & Producers	<input checked="" type="checkbox"/>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Navajo Res. is located 1900 ft. from S line and 1900 ft. from E line of sec. 38

Well No. 7

W.A. 20/1

(4 Sec. and Sec. No.)

320

(Twp.)

17W

(Range)

N.M.P.M.

(Meridian)

Undesignated Gallup

(Field)

San Juan

(County or Subdivision)

New Mexico

(State or Territory)

The elevation of the derrick floor above sea level is 5450 ft. 13

### DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate in parentheses, cementing points, and all other important proposed work)

Well spudded June 27, 1963. Set 7-5/8" CB casing at 29' and cemented to 1393'.

COKE NO. 1 - 1393' - 1373' - Perforated 19.2'

Top - 2' 0" - Gray shale with thin sand laminations

Next - 7' 0" - Fine grain gray sand with good stain and odor

Next - 7' 0" - Black shale

Last - 3' 2" - Shale with thin line laminations

Reached total depth of 1416' on July 1, 1963. Set 7-5/8" CB casing at 1413' and cemented with 75 sacks of cement. W.O.C. 24hrs. Stand off tested OK. Did not drill

ore cement plug at 1400' P.B.T.D. 1400'. Perforated 7-5/8" CB casing from 1393' - 1401' for a total of 8' and 32 holes. Treated through 7-5/8" CB casing ports. 1993

1961' with 31,000 gallons lease oil and 30,000 gal. 20/40 sand and 6 - 7/8" ball valves. After recovering all lease oil well pumped 138 bbls of oil in 24 hours.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 730

Navajo, New Mexico

Title

Dist. Sup.

ILLEGIBLE

U. S. GEOLOGICAL SURVEY  
WASHINGTON, NEW MEXICO

RECEIVED  
AUG 6 1963  
OIL CON. COM.  
DIST. 3



NUMBER OF COPIES RECEIVED	1
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FILE	
LAND OFFICE	
TRANSPORTER	
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
 Santa Fe, New Mexico  
 REQUEST FOR (OIL) - ~~ALLOWABLE~~

(Form C-104)  
 Revised 7/1/57

New Well

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Shelly Oil Company  
 (Company or Operator)  
 T 28 R 13 NMPM, Undesignated Gallup Pool  
 Sec. 28 Well No. 7 in 1/4 SE 1/4

Paradise, New Mexico 7-17-63  
 (Place) (Date)

Country, Date Spudded: 6-25-63 Date Drilling Completed: 7-3-63  
 Elevation 5100 Total Depth 1114 PBD 1100  
 Top Oil/Gas Pay 1000 Name of Prod. Form: Gallup

PRODUCING INTERVAL -

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Perforations 1000-1010  
 Open Hole X Depth Casing Shoe 1113 Tubing 1000

OIL WELL TEST -  
 Natural Prod. Test: 100 bbls./oil, 0 hrs, min. Size  
 Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 100 bbls./oil, 0 hrs, min. Size

GAS WELL TEST -  
 Natural Prod. Test: 0 MCF/day; Hours flowed 0 Choke Size  
 Method of Testing (pitot, back pressure, etc.):  
 Test After Acid or Fracture Treatment: 0 MCF/day; Hours flowed

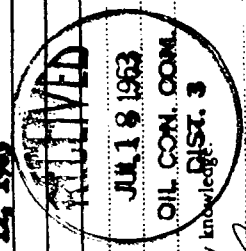
1000 1000 1000 1000  
 (FOOTAGE)  
 Tubing, Casing and Cementing Record

DATE	FOOTAGE	SALE
7-1/8	20'	0
7-2/8	1113'	75
7-3/8	1000'	--

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated with 1000 lbs. 100% HCl and 50,000 gal. water.

Casing 0 Tubing 0 Date first new oil run to tanks July 12, 1963  
 Press. 0 oil run to tanks  
 Oil Transporter Method Corporation  
 Gas Transporter

Remarks: Well pumped 100 bbls. in 24 hours.



I hereby certify that the information given above is true and complete to the best of my knowledge.  
 Approved: July 12, 1963 19 63 SHelly OIL COMPANY

OIL CONSERVATION COMMISSION

By: J. M. Garg  
 (Signature)  
 Title: Assistant District Superintendent  
 Send Communications regarding well to:  
 Name: Shelly Oil Company  
 Address: Box 750, Hobbs, New Mexico

By: Original Signed by Mr. J. Smith  
 Title: DEPUTY DISTRICT SUPERVISOR DIST. NO. 3

DEVIATION AFFIDAVIT

Date July 17, 1963

New Mexico Oil Conservation Commission

2000 Rio Arriba Road

Albuquerque, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

Jo W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of June, 1963, South West Drilling Company ran the following surveys for Skelly Oil Company on their NE 1/4 of Sec. 7, T-2N, R-10E, NMPH, lease, Well No. 7, in NE 1/4 of Sec. 7, T-2N, R-10E, NMPH, San Juan County, New Mexico.

SLOPE TEST DATA

Depth In feet Angle in Degrees 32 1/2 Depth In feet Angle in Degrees 32 1/2

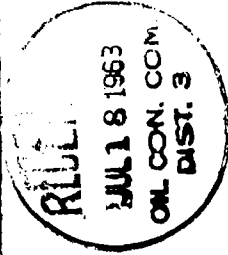
Subscribed and sworn to before me this 17 day of July, 19 63

James W. Thompson I hereby certify that the information is true and complete to the best of my knowledge and belief.

My Commission expires: 3-6-67

Name J. W. George  
Position Assistant District Superintendent

Box 720, Hobbs, New Mexico  
Address



ILLEGIBLE

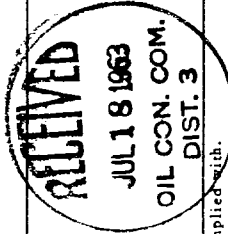
NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO <b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION          TO TRANSPORT OIL AND NATURAL GAS</b>		FORM C-110 (Rev. 7-60) 6.1
FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE		

Company or Operator <b>Shelly Oil Company</b>		Lease <b>Shelly</b>	Well No. <b>7</b>
Unit Letter <b>J</b>	Township <b>24</b>	Range <b>13N</b>	County <b>San Juan</b>
Pool <b>Undesignated Gilling</b>			
If well produces oil or condensate give location of tanks		Section <b>24</b>	Township <b>24N</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>		Address (give address to which approved copy of this form is to be sent) <b>200 Potomac Building, Arlington, Texas</b>	

Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Address (give address to which approved copy of this form is to be sent) <b>200 Potomac Building, Arlington, Texas</b>
--	---

If gas is not being sold, give reasons and also explain its present disposition:  
**Gas wanted - waiting for gas connection**

REASON(S) FOR FILING (please check proper box)  
 New Well ☐ Change in Ownership ☐  
 Change in Transporter (check one)  
 Oil ☐ Dry Gas ☐  
 Casing head gas ☐ Condensate ☐

Remarks  


The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.  
 Executed this the **17** day of **July**, 19 **63**.

OIL CONSERVATION COMMISSION	
Approved by <b>W. B. Smith</b>	By <b>J. M. George</b>
Title <b>DEPUTY OIL &amp; GAS SUPERVISOR</b>	Title <b>Assistant District Superintendent</b>
Date <b>July 18 1963</b>	Company <b>Shelly Oil Company</b>
Address <b>Box 700, Hobbs, New Mexico</b>	

ILLEGIBLE

NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO <b>CERTIFICATE OF COMPLIANCE AND AUTHORIZATION          TO TRANSPORT OIL AND NATURAL GAS</b>		FORM C-110 (Rev. 7-60) 81
NUMBER OF COPIES RECEIVED DISTRIBUTION FILE LAND OFFICE TRANSPORTER OIL GAS PRODUCTION OFFICE OPERATOR		

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE			
Company or Operator <b>Shelly Oil Company</b>		Lease <b>Barrojo m</b>	
Unit Letter <b>J</b>	Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>
Pool <b>Barrojo m</b>			
Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> give location of tanks		Unit Letter <b>C</b>	Section <b>36</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> give location of tanks		Township <b>32N</b>	Range <b>17W</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> give location of tanks		Address (give address to which approved copy of this form is to be sent) <b>Box 1568, Farmington, New Mexico</b>	
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected <b>July 31 1963</b>	
Address (give address to which approved copy of this form is to be sent) <b>Box 1568, Farmington, New Mexico</b>			


If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connections**

REASON(S) FOR FILING (please check proper box) New Well <input type="checkbox"/> Change in Ownership <input type="checkbox"/> Change in Transporter (check one) Other (explain below) Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
---	--

Remarks

**Oil transporter to be changed effective August 1, 1963.**



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **31** day of **July**, 19 **63**

OIL CONSERVATION COMMISSION	
Approved by <b>A. R. KENDRICK</b>	By <b>J. W. George</b>
Title <b>Assistant District Superintendent</b>	Title <b>Shelly Oil Company</b>
Title <b>PETROLEUM ENGINEER DIST. NO. 3</b>	Address <b>Box 730, Hobbs, New Mexico</b>
Date <b>JUL 31 1963</b>	

ILLEGIBLE

NUMBER OF COPIES RECEIVED	1
DATE OF DISTRIBUTION	7
FILE	
USE	
LAND OFFICE	
TRANSPORTER	
REGISTRATION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

FORM C-110  
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

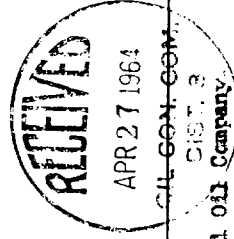
Company or Operator		Skelly Oil Company		Lease		Kavejo nps		Well No.	
Unit Letter	nps	Section	33	Township	32-N	Range	17-W	County	San Juan
Pool		Many Rocks Gallup		Federal Fee (State, Fed, Fee)					
If well produces oil or condensate give location of tanks		Unit Letter	nps	Section	34	Township	32-N	Range	17-W
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>		Address (give address to which approved copy of this form is to be sent)							
Shell Oil Company		Box 1588 - Farmington, New Mexico							
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>									
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Address (give address to which approved copy of this form is to be sent)							
None									

If gas is not being sold, give reasons and also explain its present disposition:

waiting on gas connection - Gas being vented.

REASON(S) FOR FILING (please check proper box)

New Well ☐ Change in Ownership ☐  
Change in Transporter (check one) Other (explain below)  
Oil ☒ Dry Gas ☐  
Casing head gas ☐ Condensate ☐



Remarks

Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 24th day of April 1964

OIL CONSERVATION COMMISSION		By	
Approved by		Charles J. Lane	
Original Signed Emery C. Arnold		Title	Dist. Engineer
Supervisor Dist. # 3		Company	Skelly Oil Company
Date	APR 27 1964	Address	Box 730 - Hobbs, New Mexico

1420-600-3340

Mountain Tribal

OIL ☒ GAS ☐ WELL ☐ OTHER ☐

NAME OF OPERATOR

Stelly Oil Company

ADDRESS OF OPERATOR

Box 730 - Hobbs, New Mexico

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

See also space 17 below.)

1960' PER. &amp; 1960' PER. Sec. 35-12N-17W

14. PERMIT NO.

15. ELEVATIONS (Show whether DT, RT, or etc.)

5456' DP

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

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

REPAIR WELL

ABANDON\*

CHANGE PLANS

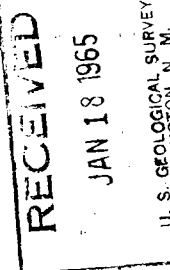
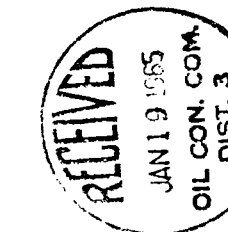
(Other)

Convert well to Water Injection

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 pertinent to this work.)

We plan to pull the rods and tubing out of this well. We will then install water injection equipment and inject water through 4-1/2" OD casing perfor. 1333-1361 into the Gallup Formation.

This well will be a Water Injection Well for the Many Rocks Gallup Pressure Maintenance Project No. 3 in the Many Rocks Gallup Oil Pool, San Juan County, New Mexico.



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

(SIGNED) H. E. Ann

SIGNED

TITLE

DIST. Superintendent

DATE

JAN 15 1965

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side

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.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depth to this work).\*

**Date work performed - April 7, 1965.**

**\*See Instructions on Reverse Side**

NEW MEXICO OIL CONSERVATION COMMISSION

NO. OF COPIES RECEIVED	3
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	1

3a. Indicate Type of Lease  
☒ Federal ☐ Indian Fee ☐  
3. State Oil & Gas Lease No.  
Fed. Cont. # 14-20-600-

SUNDY 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 "A" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER: <b>Injection Well</b>	7. Unit Agreement Name
2. Name of Operator <b>Skelly Oil Company</b>	8. Form or Lease Name <b>Navajo "B"</b>
3. Address of Operator <b>330 So. Center-Rm. 208, Casper, WY 82601</b>	9. Well No. <b>7</b>
4. Location of Well UNIT LETTER <b>J</b> 1980 FEET FROM THE <b>E</b> LINE AND <b>1980</b> FEET FROM THE <b>S</b> LINE, SECTION <b>35</b> TOWNSHIP <b>32N</b> RANGE <b>17W</b> N.M.P.M. 15. Elevation (Show whether DF, RT, CR, etc.) <b>5456 DF</b>	10. Field and Pool, or Wildcat <b>Many Rocks-Gallup</b>
	12. County <b>San Juan</b>

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
SUBSEQUENT REPORT OF:

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Injection is to be re-started in 1975.

Permission is requested for continuation of TA status for at least one year.

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

SIGNED *[Signature]*

TITLE **Area Superintendent**

DATE **10/30/74**

APPROVED BY *[Signature]* DATE

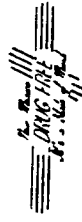
CONDITIONS OF APPROVAL, IF ANY:





STATE OF NEW MEXICO

ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE



BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-5178

December 4, 1992

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells

Navajo AA #4, E-17-32N-17W	Navajo M #2, K-33-32N-17W
Navajo AA #13, B-20-32N-17W	Navajo M #7, B-34-32N-17W
Navajo #11, E-27-32N-17W	Navajo #10, J-27-32N-17W
Navajo #6, K-27-32N-17W	Navajo P #11, D-35-32N-17W
Navajo #3, O-27-32N-17W	Navajo P #9, F-35-32N-17W
Navajo #12, I-28-32N-17W	<del>Navajo P #10, J-35-32N-17W</del>
Navajo P #6, J-35-32N-17W	

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by April 1, 1992 and work completed by December 31, 1993.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File

David Catanach-UIC Director

**Well File**

George Robin-EPA



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DIVISION  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1600 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-4175

April 13, 1993

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells  
Navajo AA #4, E-17-32N-17W Navajo AA #13, B-20-32N-17W  
Navajo #11, E-27-32N-17W Navajo #10, J-27-32N-17W  
Navajo #6, K-27-32N-17W Navajo #3, O-27-32N-17W  
Navajo #12, I-28-32N-17W Navajo M #2, K-33-32N-17W  
Navajo M #7, B-34-32N-17W Navajo P #11, D-35-32N-17W  
Navajo P #9, F-35-32N-17W Navajo P #7, J-35-32N-17W  
Navajo P #6, P-35-32N-17W

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated. You are required to file for a permit to inject under Rule 701 prior to any injection.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by June 1, 1993 and work completed by June 1, 1994.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File  
David Catanach-UIC Director  
Well File  
David Holguin-EPA

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0115  
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 ☐ Gas ☐ Other ☐ Well ☐ Well

2. Name of Operator  
A.P.A. Development, Inc.

3. Address and Telephone No.  
P.O. Box 215, Cortez, CO 81321 303-565-2458

4. Location of Well (Folio, Sec., T., R., M., or Survey Description)  
1980' FEL + 1980' FSL, Sec. 35, T 32N R 17W

5. Lease Designation and Serial No.  
14-20-600-3540

6. If Indian, Allottee or Tribe Name  
NAVAJO

7. If Unit or Co. Agreement, Designation  
NAVAJO P #7

8. Well Name and No.  
3004511620051

9. API Well No.  
MANY ROCKS

10. Field and Pool or Exploration Area  
SAN JUAN, NM

11. County or Parish, State

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 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"/> Other
	<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

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.)

Plan to T.A. w.t.l well can be  
Conditioned back to production.

RECEIVED  
APR 9 1993  
OIL CON. DIV  
DIST. 3

8. ATTACHED FOR  
CONDITIONS OF APPROVAL

THIS APPROVAL EXPIRES APR 01 1994

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

Signed: Patricia L. L...  
(This space for Federal or State office use)

Approved by: \_\_\_\_\_  
Conditions of approval, if any:

Title

Title

APR 3 1993

APPROVED  
AS AMENDED

APR 06 1993

15. I, S.C. Section 1801, makes a statement for the person knowledge and a liability to make in any department or agency of the United States, for fraudulent statements or representations as to any matter within its jurisdiction.

DISTRICT MANAGER

\*See instruction on Reverse Side

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA  
1235 LA PLATA HIGHWAY  
FARMINGTON, NEW MEXICO 87401

CONDITIONS OF APPROVAL:

This Temporary Abandonment approval is contingent upon conducting a casing integrity test by JUL 01 1993. Mark Kelly with the Farmington Office is to be notified at least 48 hours prior to conducting the casing integrity test (505-599-8907). If the casing test fails, you will be required to submit your plans to repair the casing or plug and abandon the well.

Office Hours: 7:45 a.m. to 4:30 p.m.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993RECEIVED  
BLM

## SUNDY NOTICES AND REPORTS ON WELLS

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

SUBMIT IN TRIPLICATE 070 FARMINGTON, NM

1. Type of Well  
☐ Oil ☐ Gas ☒ Water Injection☐ Well ☐ Other2. Name of Operator  
A.P.A. Development, Inc.3. Address and Telephone No.  
P.O. Box 215 Cortez CO. 81321 (303) 565-24584. Location of Well (Footage, Sec., T., R., N., or Survey Description)  
1980' FEL 1980' FSL SEC 35, T32N R17W5. If Unit or EA, Agreement Designation  
Navajo6. Well Name and No.  
Navajo "P"7. API Well No.  
30045116200518. Field and Pool, or Exploratory Area  
Many Rocks CA19. County or Parish, State  
San Juan N.M.

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

## TYPE OF SUBMISSION

## TYPE OF ACTION

☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other☐ 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, 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.)

Plan to Plug Wells as follows:

1. Equalize cement plug from 1400' to 1303' surface.
2. Pick up to 1302' circulate condition fluid to 50' of surface.
3. Circulate cement 50' to surface
4. Circulate cement 50' to surface between 4 1/2" and 7 5/8" casings
5. Weld on dry hole marker and remediate surface location.

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

SEE ATTACHED FOR  
CONDITIONS OF APPROVALSigned Patricia W. Wadley Date 10/14/94

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_

Conditions of approval, if any.

APPROVED

OCT 25 1994

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.

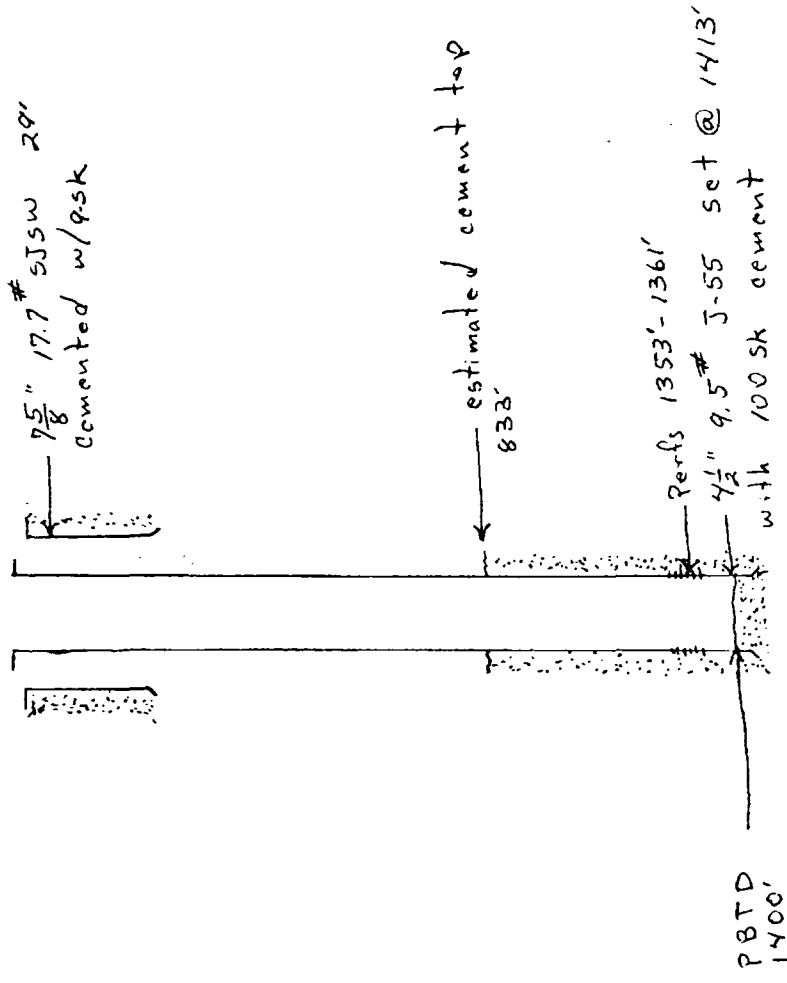
\*See Instruction on Reverse Side

44-0000

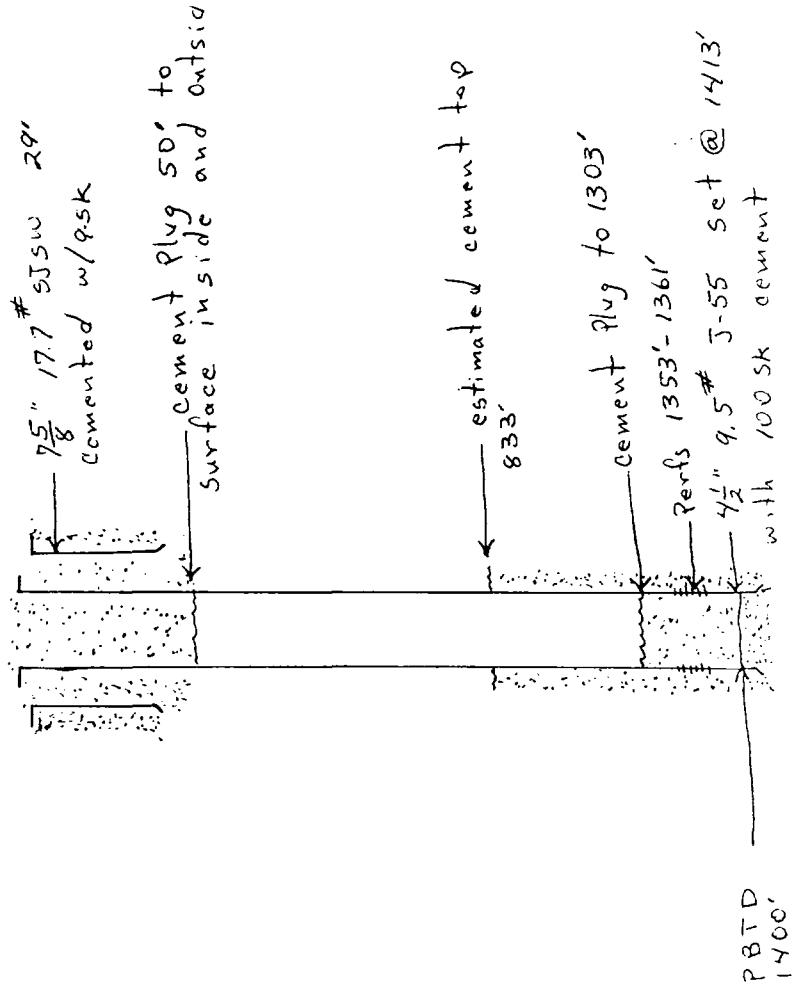
Novajo Well # P-7

Log # 14-20-600-3540

existing conditions



Novajo Well # P-7      loose # 14-20-600-3540



UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT  
FARMINGTON DISTRICT OFFICE  
1235 La Plata Highway  
Farmington, New Mexico 87401

Attachment to Notice of

Re: Permanent Abandonment

Intention to Abandon

Well: 7 Navajo P

CONDITIONS OF APPROVAL

1. Plugging operations authorized are subject to the attached "General Requirements for Permanent Abandonment of Wells on Federal and Indian Leases."

2. **Mike Flaniken** with the Farmington Office is to be notified at least 24 hours before the plugging operations commence (505) 599-8907.

3. The following modifications to your plugging program are to be made (when applicable):

1. **Tag top of cement plug @ 1303'.**

2. Spot a cement plug from 1066' to 966' inside the casing plus 50 linear feet excess. (top of Gallup @ 1016')

3. Extend surface plug from 79' to the surface on the inside and outside of the casing. (surface casing @ 29')

**Note:** The above modifications are minimum standards. It is acceptable to pump additional cement and combine plugs.



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.  
1420-6003540

6. If Indian, Allotment or Tribe Name  
NAVAJO TRIGAL

7. If Unit or CA, Agreement Designation

SUNDY 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 ☐ Gas ☒ Other  
☐ Well ☐ Well

2. Name of Operator  
APA DEV - INE

3. Address and Telephone No.  
PO Box 1093 Shiprock NM 87940

4. Location of Well (Fontage, Sec., T., R., or Survey Description)  
No. 7 - NAVAJO 1980 FSL 1980 FEL  
Sec 35 Lat 14206003546

8. Well Name and No.  
NAVAJO 10P

9. API Well No.  
304511162

10. Field and Pool or Exploratory Area  
MAKAY ROCKS

11. County or Parish, State  
SON JONAN

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"/> Abandonment
<input 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"/> Other

☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☒ Conversion to Injection  
☐ Dispose Water

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, 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.)

Key Line Injection Well for West Gas  
Project 129MB

ST 001-2 000000  
070 000000000000000000

RECEIVED  
MAY 1993  
001 000000000000000000

14. I hereby certify that the foregoing is true and correct.  
Signed William E. Brown Title Pres Date 6-1-97  
(This space for Federal or State office use)  
Approved by IS/Duane W. Spencer Title \_\_\_\_\_ Date JAN -4 1997  
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, or to any matter within its jurisdiction.

Adapters—Material

Size

## SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" casing perfor. 1353-1361' with 31,800 gallons of Lease Oil & 30,000 20/40 Sand & 4 - 7/8" Ball Sealers.						
HISTORICAL WELL						

## TOOLS USED

Rotary tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Cable tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

## DATES

Put to producing **July 12, 1963**, 19\_\_\_\_

The production for the first 24 hours was **138** barrels of fluid of which **99.9** % was oil; \_\_\_\_\_ % emulsion; \_\_\_\_\_ % water; and **.1** % sediment. Gravity, °Bé. **41.3°**

If gas well, cu. ft. per 24 hours \_\_\_\_\_ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_

Rock pressure, lbs. per sq. in. \_\_\_\_\_

## EMPLOYEES

**Johnston**, Driller \_\_\_\_\_, Driller  
**Oden**, Driller \_\_\_\_\_, Driller

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	1014	1014	Sand & Shale
1014	1210	196	Sand & Shale - Top Middle Gallup - 1014'
1210	1352	142	Sand & Shale - Top Lower Gallup - 1210'
1352	1368	16	Sand & Shale - Top Tecite - 1352'
1368	1416	48	Sand & Shale - Top Sanatee - 1368'
	1416	Total Depth	
	1400	Plug Back Total Depth	
Geological Tops picked by Lane Wells Induction Electric Log.			

**CORE NO. 1 - 1353' - 1373' (20') - Recovered 19.2'**

Top - 2.0' - Gray Shale with thin sand laminations  
 Next - 7.0' - Fine Grain Gray sand with good stain and odor  
 Next - 7.0' - Black Shale  
 Next - 3.2' - Shale with thin lime laminations

ILLEGIBLE

FROM—

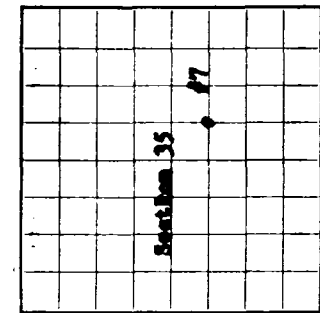
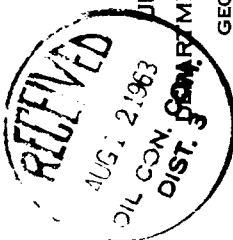
TO—

TOTAL FEET

FORMATION

FORMATION RECORD—CONTINUED

16-48094-5



U. S. LAND OFFICE ~~Window Book~~  
SERIAL NUMBER **14-20-600-3540**  
LEASE OR PERMIT TO PROSPECT **CT**  
**Havajo #1**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

1963

## LOG OF OIL OR GAS WELL

LOCATE WELL CORRECTLY

Company **Amally Oil Company** Address **Box 790 - Hobbs, New Mexico**  
Lessor or Tract **Havajo #1** Field **Mary Becka Gallup State New Mexico**  
Well No. **7** Sec. **35** T. **34N** R. **17W** Meridian **N.M.P.M.** County **San Juan**  
Location **1980 ft. [N] of [S] Line and 1980 ft. [W] of [E] Line of Section 35** Elevation **5499' [B]**  
(Denote gas by G)  
The information given herewith is a complete and correct record of the well and all work done thereon  
so far as can be determined from all available records.  
(ORIGINAL) **H. E. Aab**  
Signed \_\_\_\_\_

Date **August 7, 1963** Title **Dist. Sept.**  
The summary on this page is for the condition of the well at above date.  
Commenced drilling **June 27, 1963** Finished drilling **July 1, 1963**

### OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from **1254'** to **1261'** No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_  
**IMPORTANT WATER SANDS**  
No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

### CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated From-- To--	For purpose
7-5/8" 4-1/2"	29.1	8	HYDROKAL	100	HYDROKAL	1254' to 1261'	1254' to 1261'	For purpose of lining well
4-1/2" 14.7	14.7	8	HYDROKAL	100	HYDROKAL	1261' to 1261'	1261' to 1261'	For purpose of lining well
4-1/2" 14.7	14.7	8	HYDROKAL	100	HYDROKAL	1261' to 1261'	1261' to 1261'	For purpose of lining well
4-1/2" 14.7	14.7	8	HYDROKAL	100	HYDROKAL	1261' to 1261'	1261' to 1261'	For purpose of lining well
4-1/2" 14.7	14.7	8	HYDROKAL	100	HYDROKAL	1261' to 1261'	1261' to 1261'	For purpose of lining well
4-1/2" 14.7	14.7	8	HYDROKAL	100	HYDROKAL	1261' to 1261'	1261' to 1261'	For purpose of lining well
4-1/2" 14.7	14.7	8	HYDROKAL	100	HYDROKAL	1261' to 1261'	1261' to 1261'	For purpose of lining well
4-1/2" 14.7	14.7	8	HYDROKAL	100	HYDROKAL	1261' to 1261'	1261' to 1261'	For purpose of lining well
4-1/2" 14.7	14.7	8	HYDROKAL	100	HYDROKAL	1261' to 1261'	1261' to 1261'	For purpose of lining well

### MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8" 29.1	29'	100	By Hand Pump & Plug	10.0	100
4-1/2" 14.7	14.7'	100	By Hand Pump & Plug	10.0	100
4-1/2" 14.7	14.7'	100	By Hand Pump & Plug	10.0	100
4-1/2" 14.7	14.7'	100	By Hand Pump & Plug	10.0	100
4-1/2" 14.7	14.7'	100	By Hand Pump & Plug	10.0	100
4-1/2" 14.7	14.7'	100	By Hand Pump & Plug	10.0	100
4-1/2" 14.7	14.7'	100	By Hand Pump & Plug	10.0	100
4-1/2" 14.7	14.7'	100	By Hand Pump & Plug	10.0	100
4-1/2" 14.7	14.7'	100	By Hand Pump & Plug	10.0	100

MARK

ILLEGIBLE

Form 9-331  
(May 1963)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.  
Cont. 14-20-600-3540  
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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection well	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
Skelly Oil Company	Navajo "P"
3. ADDRESS OF OPERATOR	9. WELL NO.
Box 3360, Casper, WY 82602	7
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT
1980' FEL & 1980' FSL NW/4 SE/4	Many Rocks-Gallup
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
	35-T32N-R17W
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH
5456' DF	San Juan
	13. STATE
	NM

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

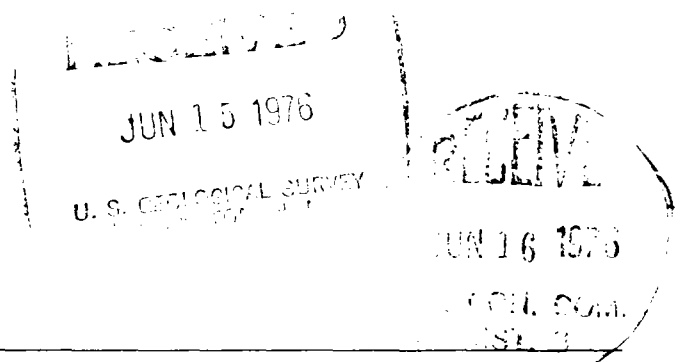
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Temporarily Abandon		(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 pertinent to this work.)\*

A study of this lease is being made for possible recompletions in other zones and we request permission for continuation of TA status for one more year.

TEMPORARY ABANDONMENT  
EXPIRES

JUN 1 1977



18. I hereby certify that the foregoing is true and correct  
SIGNED Ray J. McWhorter TITLE Area Superintendent DATE 6/11/76  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

DISTRIBUTION		1
SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		4
PRORATION OFFICE		

I. Operator  
Getty Oil Company

Address  
Box 3360, Casper, Wyoming 82602

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner  
Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 7	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-200-600-3540
Location				
Unit Letter J	1980	Feet From The East	Line and 1980	Feet From The South
Line of Section 35	Township 32N	Range 17W	NMPM,	San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, NM				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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'tv.	Diff. Res'tv.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RLB, 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)

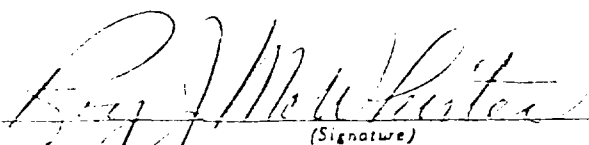
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-Bbls.

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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

  
(Signature)

Area Superintendent  
(Title)

2/4/77  
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 15 1977, 19

BY ORIGINAL SIGNED BY N. E. MAXWELL, JR.

TITLE PETROLEUM ENGINEER (P.E.)

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner  
Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "p"	Well No. 7	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location Unit Letter J ; 1980 Feet From The East Line and 1980 Feet From The South Line of Section 35 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, NM 87401				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

*James P. Phipps*  
(Signature)  
co. operator  
(Title)  
Sept-11-79  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19  
BY Original Signed by A. R. Kendrick  
SUPERVISOR DISTRICT # 3  
TITLE

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

SALE TAX  
FUEL  
U.S.G.S.  
LAND OFFICE  
TRANSPORTER  
OIL  
GAS  
OPERATION  
PRODUCTION OFFICE

REQUEST FOR ALLOWABLE  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator  
BayStar Petroleum Corporation  
Address  
P. O. Box 2975, Corpus Christi, Texas 78403  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
Injection Well  
If change of ownership give name and address of previous owner  
WTR Oil Company, Drawer LL, Cortez, Colorado 81321

I. DESCRIPTION OF WELL AND LEASE  
Lease Name  
Navajo "P"  
Well No.  
7  
Pool Name, including Formation  
Many Rocks Gallup  
Kind of Lease  
Federal  
Lease No.  
14-20-600-3540  
Location  
Unit Letter  
J  
1980  
Feet From The  
South  
Line and  
1980  
Feet From The  
East  
Line of Section  
35  
Township  
32N  
Range  
17W  
NMPM,  
San Juan  
County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☐  
Address (Give address to which approved copy of this form is to be sent)  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐  
Address (Give address to which approved copy of this form is to be sent)  
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:  
III. 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

TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks  
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  
MAY 15 1985

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

CERTIFICATE OF COMPLIANCE  
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  
Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 8, 1985  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED  
MAY 10 1985  
BY  
SUPERVISOR DISTRICT # 3  
TITLE  
This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

RECEIVED

OCT 17 1988

OIL CON. DIV.

DIST. 3

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator A.P.A. Development Corporation		
Address P.O. Box 215, Cortez, Colorado 81321		
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> New Well	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership		

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 7	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Navajo	Lease No. 14-20-600-3540
Location Unit Letter J : 1980 Feet From The East Line and 1980 Feet From The South Line of Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, NM 87413	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34
	Twp. 32N	Rge. 17W
Is gas actually connected?		When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Patricia B. Wootley  
(Signature)  
Operator  
(Title)  
10-12-88  
(Date)

OIL CONSERVATION DIVISION

OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY Burt J. Clump

TITLE SUPERVISION DISTRICT #3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



Form 3160-5  
November 1983  
Formerly 0-331

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

Budget Bureau No. 1004-0100  
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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <b>WIW</b>	2. LEASE DESIGNATION AND SERIAL NO. <b>14-20-600-3540</b>
3. NAME OF OPERATOR <b>A.P.A. Development Inc.</b>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Navajo</b>
4. ADDRESS OF OPERATOR <b>Box 215 Cortez CO. 81321</b>	7. UNIT AGREEMENT NAME
5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <b>1980' FEL + 1980' FSL</b> <b>Sec 35 T32N R17W</b>	8. FARM OR LEASE NAME <b>Navajo "P"</b>
9. PERMIT NO.	9. WELL NO. <b>7</b>
10. ELEVATIONS (Show whether OF, RT, OR, etc.)	10. FIELD AND POOL, OR WILDCAT <b>Many Rocks</b>
	11. SEC., T./S., R., OR BLE. AND SURVEY OR AREA <b>Sec 35 T32N R17W</b>
	12. COUNTY OR PARISH <b>San Juan</b>
	13. STATE <b>NM</b>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
RIPOUT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANT <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

(Other) **Produce Well**

(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 slopes pertinent to this work.)

Plan to condition well to produce oil and  
put on the pump

RECEIVED  
MAR 27 1992  
OIL CON. DIV.  
DIST. 3

RECEIVED  
BLM  
92 MAR 17 PM 1:56  
019 FARMINGTON, N.M.

THIS APPROVAL EXPIRES **APR 01 1993**

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

SIGNED Pat Woolley TITLE \_\_\_\_\_ DATE 3/13/92

(This space for Federal or State office use)

**APPROVED**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE MAR 26 1992

CONDITIONS OF APPROVAL, IF ANY:

**AREA MANAGER**

\*See Instructions on Reverse Side  
**NMOOD**

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.

APPLICATION OF SKELLY OIL COMPANY  
TO EXPAND ITS MANY ROCKS-GALLUP  
PRESSURE MAINTENANCE PROJECT NO. 3  
IN THE MANY ROCKS-GALLUP OIL POOL  
IN SAN JUAN COUNTY, NEW MEXICO.

ADMINISTRATIVE ORDER  
PMX-13

ADMINISTRATIVE ORDER  
OF THE OIL CONSERVATION COMMISSION

Under the provisions of Order No. R-2664, Skelly Oil Company has made application to the Commission on November 9, 1964, for permission to expand its Many Rocks-Gallup Pressure Maintenance Project No. 3 in the Many Rocks-Gallup Oil Pool, San Juan County, New Mexico.

NOW, on this 30th day of December, 1964, the Secretary-Director finds:

1. That application has been filed in due form.
2. That satisfactory information has been provided that all offset operators have been duly notified of the application.
3. That objection lodged by the State Engineer has been withdrawn.
4. That the proposed injection wells are eligible for conversion to water injection under the terms of Order No. R-2664.
5. That the proposed expansion of the above-referenced pressure maintenance project will not cause waste nor impair correlative rights.
6. That the application should be approved.

IT IS THEREFORE ORDERED:

That the applicant, Skelly Oil Company, be and the same is hereby authorized to inject water into the Gallup formation through the following described wells for purposes of Pressure Maintenance, to wit:

Navajo "M" Well No. 8 located in the SE/4 NE/4 of Section 34,  
Navajo "M" Well No. 12 located in the NE/4 NW/4 of Section 34,  
Navajo "P" Well No. 7 located in the NW/4 SE/4 of Section 35,  
Navajo "P" Well No. 9 located in the SE/4 NW/4 of Section 35,  
and Navajo "P" Well No. 11 located in the NW/4 NW/4 of Section 35, all in Township 32 North, Range 17 West, NMPM,

DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.

STATE OF NEW MEXICO  
OIL CONSERVATION COMMISSION

*A. L. Porter, Jr.*  
A. L. PORTER, Jr.,  
Secretary-Director

APR 27 1992  
OIL CON. DIV  
DIST. 3

SEAL



APA Development.

NAVASO ~~M #8~~ P8

M ~~H-34~~<sup>35</sup> 32N 17W.

1980N 775E 660'S 660'W

45-11193

m 35

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

5. Lease Designation and Serial No.  
**14-20-603-5013**

6. If Indian, Allottee or Tribe Name  
**Navajo Tribe**

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
**8 Navajo M**

9. API Well No.  
**30045 11193**

10. Field and Pool, or Exploratory Area

11. County or Parish, State  
**San Juan, NM**

**SUBMIT IN TRIPLICATE**

1. Type of Well  
☐ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator **AAA Development**  
**% NMOCO**

3. Address and Telephone No.  
**1000 Rio Brazos Rd. Aztec NM 87410 334-6178**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**34-32N-17W 1980 / N-775/E**

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 \_\_\_\_\_
- ☐ 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.)\*

*See attached plugging procedure.*

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

Signed **NMOCO CONTRACT PLUGGING** Title **8**

Date **8/11/00**

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_  
Conditions of approval, if any:

Date **8/17/00**

**API NUMBER** 30-045-11193  
**OPERATOR NAME** APA DEVELOPMENT CORP  
**PROPERTY NAME** NAVAJO M  
**SECTION 34** TOWNSHIP 32N  
**FOOTAGE** 1980 FNL 775 FEL UL "H"

270 112 11 25  
**WELL NUMBER**  
 112 11 25

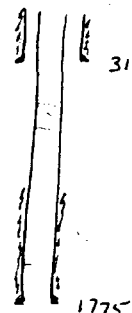
8

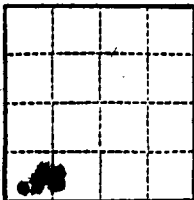
**RANGE** 17W

Sur Csg OD NA HOLE	8 5/8	XX		XX
SUR CSG TD	31	XX		XX
SUR CSG WT	32	XX		XX
TOP OF CMT	0	XX		XX
ACTUAL	CIRC	XX		XX
CACULATED	10SX	XX		XX
PROD CSG OD 7 7/8	5 1/2	XX		XX
PROD CSG TD	1775	XX		XX
PROD CSG WT	14/17	XX		XX
TOP OF CMT	1264	XX		XX
FORMATION TOP	ACTUAL	EST		
GALLUP 1405'	CACULATED	75SX		
MANCOS 280'	PERF TOP	1732	XX	XX
	PERF BOTTOM	1738	XX	XX
	PACKER		XX	XX
	TYPE OF PLUG		XX	XX
	CIBP & CMT		XX	XX
	CMT		XX	XX

### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOOH W/TUBING, PICK UP WORK STRING, CIRC HOLE  
 SPOT 18 SX PLUG 1643-1493 WOC, TAG, FILL AS REQUIRED  
 PERF @ 330' PUMP 47 SX ,330-230' 30 OUTSIDE CSG, 17 INSIDE  
 PERF @ 81' CIRC CEMENT TO SURFACE, EST 23 SX  
 CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS  
 Close pits according to guidelines: Clean and level location





(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Budget Bureau No. 43-R300.4  
Approval expires 12-31-60.

Indian Agency \_\_\_\_\_

**Navajo - Ute**

Allottee **Mountain Tribal**

Lease No. **14-23-600-3510**

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL _____	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF _____	
NOTICE OF INTENTION TO CHANGE PLANS _____		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING _____	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF _____		SUBSEQUENT REPORT OF ALTERING CASING _____	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL _____		SUBSEQUENT REPORT OF REDRILLING OR REPAIR _____	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE _____		SUBSEQUENT REPORT OF ABANDONMENT _____	
NOTICE OF INTENTION TO PULL OR ALTER CASING _____		SUPPLEMENTARY WELL HISTORY _____	
NOTICE OF INTENTION TO ABANDON WELL _____			

RECEIVED  
JUL 18 1963  
U. S. GEOLOGICAL SURVEY  
WASHINGTON, NEW MEXICO

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

July 5, 1963

Well No. **8** is located **660'** ft. from **N** line and **660** ft. from **W** line of sec. **35**

**Sec. 35** (1/4 Sec. and Sec. No.) **32N** (Twp.) **17W** (Range) **NMPM** (Meridian)  
**Undesignated Gallup** (Field) **San Juan** (County or Subdivision) **New Mexico** (State or Territory)

The elevation of the derrick floor above sea level is **5262** ft. (est.)

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 8 to around 1750' to test Gallup formation.

Our casing program is as follows:

- 20' - 7-5/8" OD 17.7# Spiral Weld Casing - to be cemented with 10 sacks regular cement.
- 1750' - 4-1/2" OD 9.5# J-55 Casing - to be cemented with 75 sacks regular cement w/6% gel and 25# gilsonite and 25 sacks regular w/2% calcium chloride.

RECEIVED  
JUL 9 1963  
ON. COM

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company **SKELLY OIL COMPANY**

Address **Box 730, Hobbs, New Mexico**

By **L. A. Stuckling**

Title **Area Foreman**

## NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

## SECTION A.

Date July 5, 1963

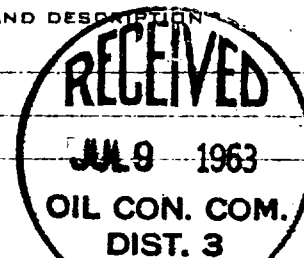
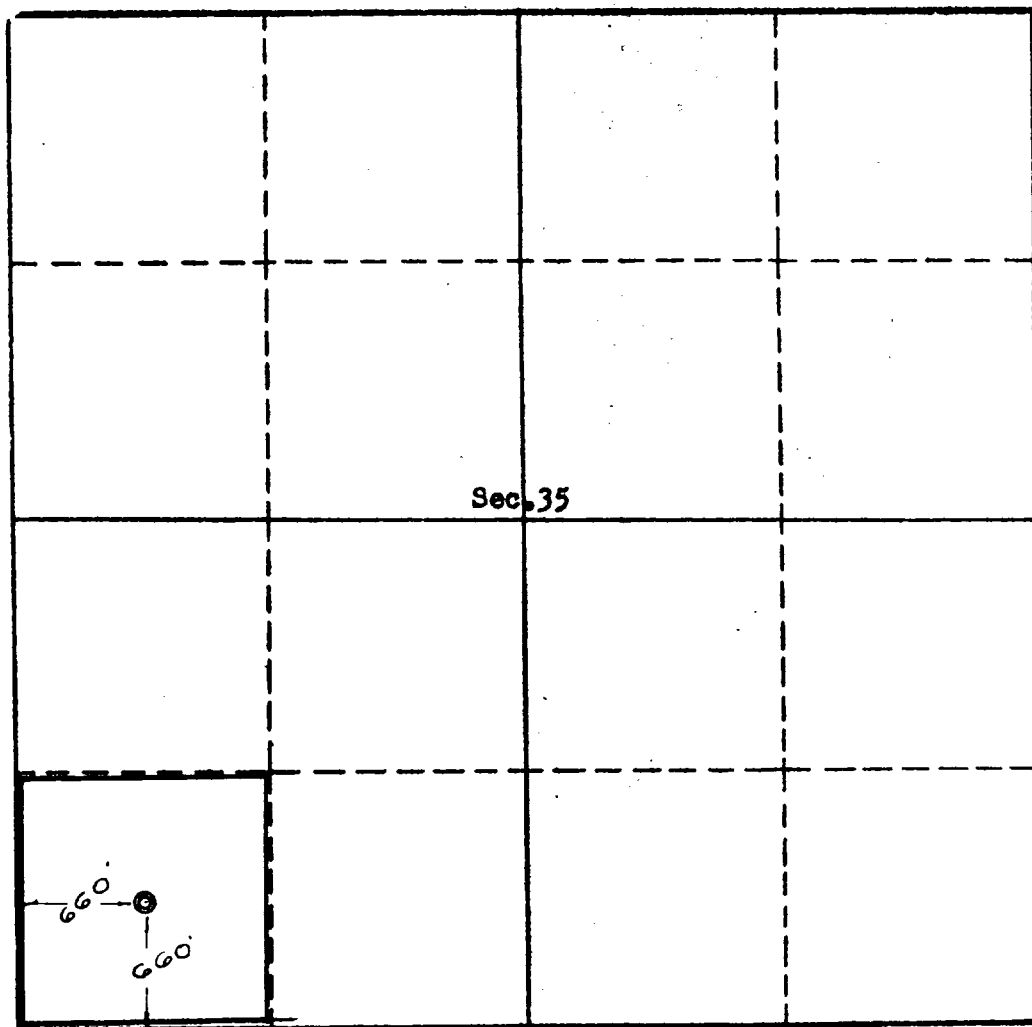
Operator Skelly Oil Company Lease Nava Jo "PN"  
 Well No. 8 Unit Letter M Section 35 Township 12 North Range 17 West NMPM  
 Located 660 Feet From South Line, 660 Feet From West Line  
 County San Juan G. L. Elevation 5868 (graded) Dedicated Acreage 40 Acres  
 Name of Producing Formation Gallup Pool Undesignated Gallup

1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_ If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

## SECTION B.



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY

(OPERATOR)

*S. A. Stueckling*  
 (REPRESENTATIVE)

BOX 730, Hobbs, New Mexico  
 (ADDRESS)

This is to certify that the well location shown on the plat in Section B 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 June 25, 1963

Four States Engineering Co.  
 FARMINGTON, NEW MEXICO

*Edward V. Cook*  
 REGISTERED ENGINEER OR  
 LAND SURVEYOR

Certificate No. 3602

Sec. 35
48



(SUBMIT IN TRIPLICATE)

 UNITED STATES  
 DEPARTMENT OF THE INTERIOR  
 GEOLOGICAL SURVEY

 Indian Agency .....  
 Navajo Ute  
 Mountain Tribal  
 Allottee .....  
 Lease No. 14-20-600-3540

## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL.....	SUBSEQUENT REPORT OF WATER SHUT-OFF.....	XX
NOTICE OF INTENTION TO CHANGE PLANS.....	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING.....	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF.....	SUBSEQUENT REPORT OF ALTERING CASING.....	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL.....	SUBSEQUENT REPORT OF REDRILLING OR REPAIR.....	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE.....	SUBSEQUENT REPORT OF ABANDONMENT.....	
NOTICE OF INTENTION TO PULL OR ALTER CASING.....	SUPPLEMENTARY WELL HISTORY.....	
NOTICE OF INTENTION TO ABANDON WELL.....	Perforating & Treating.....	XX

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Hobbs, New Mexico August 7, 1963

Navajo "P"

Well No. 8 is located 660 ft. from  $\begin{matrix} \text{N} \\ \text{S} \end{matrix}$  line and 660 ft. from  $\begin{matrix} \text{E} \\ \text{W} \end{matrix}$  line of sec. 35
 Sec. 35  
 (1/4 Sec. and Sec. No.)

 32N  
 (Twp.)

 17W  
 (Range)

 N.M.P.M.  
 (Meridian)

 Wany Rocks Gallup  
 (Field)

San Juan

(County or Subdivision)

New Mexico

(State or Territory) AUG 9 1963

The elevation of the derrick floor above sea level is 5474 ft. DP

## DETAILS OF WORK

 U. S. GEOLOGICAL SURVEY  
 FORT HOBBS, NEW MEXICO

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Well spudded July 6, 1963. Set 7-5/8" OD casing at 28' and cemented with 8 sacks by hand. W.O.C. Drilled to 1705'

CORE NO. 1 - 1705' - 1725' (20') - RECOVERED - 20'

Top - 9.0' - Black gray shale

Next - 5.5' - Gray fine grained sand saturated with oil

Next - 5.5' - Black shale with lime laminations

Reached total depth of 1770' on July 9, 1963. Set 4-1/2" OD casing at 1766' and cemented with 100 sacks of cement. W.O.C. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1750'. P.B.T.D. 1750'. Perforated 4-1/2" OD casing from 1713' - 1718' for a total of 5' and 20 holes. Treated through 4-1/2" OD casing perfs. 1713' - 1718' with 29,710 gallons lease oil and 30,000# 20/40 sand and 4 - 7/8" ball sealers. After recovering all load oil well pumped 91 barrels of oil in 24 hours.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Skelly Oil Company

Address Box 730

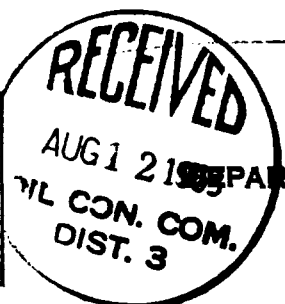
Hobbs, New Mexico

By (ORIGINAL SIGNED) H. E. Aab

Title Dist. Supt.



Sec. 35			



(SUBMIT IN TRIPLICATE)

UNITED STATES

DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_  
Bureau File \_\_\_\_\_  
Allotted \_\_\_\_\_  
Lease No. \_\_\_\_\_

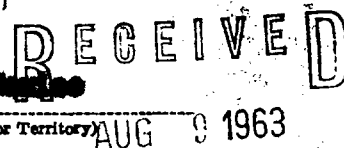
## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	XX
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	XX
NOTICE OF INTENTION TO ABANDON WELL	Perforating & Treating	

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Hobbs, New Mexico August 7, 1963

Well No. 8 is located 660 ft. from S line and 660 ft. from W line of sec. 35  
SW 1/4 SW 1/4 Sec. 35 35N 17W N.M.P.M.  
 (34 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
May Basin Gallup San Juan New Mexico  
 (Field) (County or Subdivision) (State or Territory)



The elevation of the derrick floor above sea level is 5475 ft.

### DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing jobs, and all other important proposed work.)  
 Well spudded July 6, 1963. Set 4-1/2" OD casing at 1705' and cemented with 8 sacks by hand, W.O.C. Drilled to 1705'

COSE NO. 1 - 1705' - 1725' (20') - RECOVERED - 20'

Top - 9.0' - Black gray shale  
 Next - 3.5' - Gray fine grained sand saturated with oil  
 Next - 3.5' - Black shale with lime laminations

Reached total depth of 1770' on July 9, 1963. Set 4-1/2" OD casing at 1766' and cemented with 200 sacks of cement. W.O.C. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1750'. F.B.T.B. 1750'. Perforated 4-1/2" OD casing from 1723' - 1728' for a total of 5' and 20 holes. Treated through 4-1/2" OD casing perfor. 1723' - 1728' with 20,720 gallons lease oil and 30,000 20/40 sand and 4 - 7/8" ball sealers. After recovering all lease oil well pumped 71 barrels of oil in 24 hours.

ILLEGIBLE

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 730

Hobbs, New Mexico

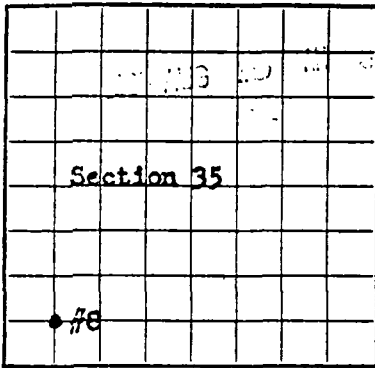
By (ORIGINAL SIGNED) H. E. Aab

Title Dist. Supt.

# FORMATION RECORD—Continued

Form 9-330

Form approved.  
Budget Bureau No. 42-R355.4



LOCATE WELL CORRECTLY



U. S. LAND OFFICE Window Rock  
SERIAL NUMBER 14-20-600-3540  
LEASE OR PERMIT TO PROSPECT Navaio "P"

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

U. S. GEOLOGICAL SURVEY  
WASHINGTON, D. C.

## LOG OF OIL OR GAS WELL

Company Skelly Oil Company Address Box 730 - Hobbs, New Mexico  
Lessor or Tract Navaio "P" Field Many Rocks Gallup State New Mexico  
Well No. 2 Sec. 35 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
Location 660 ft. [N.] of S. Line and 660 ft. [E.] of W. Line of Section 35 Elevation 5474' (Derive from relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Signed

(ORIGINAL) H. E. Aas

Date August 7, 1963

Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

Commenced drilling July 6, 1963 Finished drilling July 9, 1963

### OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1712' to 1718' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

### IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

### CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
7-5/8"	17.7#	8-8	J-55	1760'	Guide	1713' - 1718'			Surface
4-1/2"	9.5#	8-8	J-55	1760'	Float	1713' - 1718'			Production

### MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8"	28'	8	By Hand	---	---
4-1/2"	1766'	100	Pump & Plug	---	---

MARK

# PLUGS

Heaving plug—Material ..... Length ..... Depth set .....

Adapters—Material ..... Size .....

## SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" OD casing perfor 1713' - 1718' with 29,710 gallons of lease oil, 30,000# 20/40 sand and 4 - 7/8" Ball Sealers.						

## TOOLS USED

Rotary tools were used from ..... 0 ..... feet to ..... 1770 ..... feet, and from ..... feet to ..... feet

Cable tools were used from ..... feet to ..... feet, and from ..... feet to ..... feet

## DATES

....., 19.....

Put to producing ..... July 21, ..... 19-63-

The production for the first 24 hours was ..... 91 ..... barrels of fluid of which 99.9% was oil; .....% emulsion; .....% water; and ..... 1 .....% sediment.

Gravity, °Bé. .... 41.29 .....

If gas well, cu. ft. per 24 hours .....

Gallons gasoline per 1,000 cu. ft. of gas .....

Rock pressure, lbs. per sq. in. ....

## EMPLOYEES

..... Johnston ..... Driller ..... Driller

..... Odom ..... Driller ..... Driller

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	1373	1373	Sand & Shale
1373	1566	193	Sand & Shale - Top Middle Gallup - 1373'
1566	1712	146	Sand & Shale - Top Lower Gallup - 1566'
1712	1770	58	Sand & Shale - Top Tocito - 1712'
	1770	Total Depth	
	1750	Plug Back Total Depth	
Geological Tops by Lane Wells Induction Electric Log.			

CORE NO. 1 - 1705' - 1725' (20') - RECOVERED - 20'

Top - 9.0' - Black & gray shale  
Next - 5.6' - Gray fine grained sand saturated with oil  
Next - 5.5' - Black shale with lime laminations

FROM—	TO—	TOTAL FEET	FORMATION
-------	-----	------------	-----------

(OVER)

FORMATION RECORD—Continued

16-43094-5

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NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
~~Recompleting~~

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico (Place) 7-23-63 (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company (Company or Operator) Navajo "PH" (Lease), Well No. 8, in SW 1/4 SW 1/4, M, Sec. 35, T. 32N, R. 17W, NMPM, Many Rocks Gallup Pool San Juan County. Date Spudded 7-6-63 Date Drilling Completed 7-9-63

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Section 35

Well No. 8

Elevation 5874' KB Total Depth 1770' PBD 1753'

Top Oil/Gas Pay 1713' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1713'-1718'

Open Hole --- Depth Casing Shoe 1766' Depth Tubing 1700'

OIL WELL TEST -

Natural Prod. Test: --- bbls. oil, --- bbls water in --- hrs, --- min. Size ---

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 91 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size ---

GAS WELL TEST -

Natural Prod. Test: --- MCF/Day; Hours flowed --- Choke Size ---

Method of Testing (pitot, back pressure, etc.): ---

Test After Acid or Fracture Treatment: --- MCF/Day; Hours flowed ---

Choke Size --- Method of Testing: ---

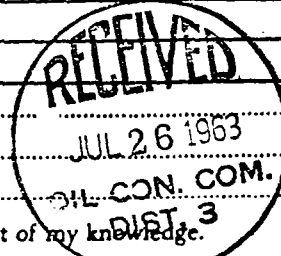
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated with 29,710 gals. lease oil and 30,000# 20-40 sand.

Casing Press. --- Tubing Press. --- Date first new oil run to tanks July 21, 1963

Oil Transporter McWood Corporation

Gas Transporter ---

Remarks: Well pumped 91 barrels in 24 hours.



I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved JUL 26 1963, 19

SKELLY OIL COMPANY (Company or Operator)

By: J. W. George (Signature)

Title Assistant District Superintendent Send Communications regarding well to:

Name Skelly Oil Company

Address Box 720, Hobbs, New Mexico

OIL CONSERVATION COMMISSION

By: [Signature] Supervisor Dist. # 3

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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo npr</b>		Well No. <b>8</b>	
Unit Letter <b>M</b>	Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal-Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>G</b>	Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>McWood Corporation</b>				Address (give address to which approved copy of this form is to be sent)  <b>330 Petroleum Building; Abilene, Texas</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas Vented - waiting for gas connection**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas . ☐ Condensate.. ☐

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 23 day of July, 19 63.

**OIL CONSERVATION COMMISSION**

Approved by

Title

**Supervisor Dist. # 3**

Date

**JUL 26 1963**

By

Title

**Assistant District Superintendent**

Company

**Skelly Oil Company**

Address

**Box 720, Hobbs, New Mexico**

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SANTA FE, NEW MEXICO  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110  
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "P"</b>		Well No. <b>8</b>	
Unit Letter <b>M</b>	Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal-Indian</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>C</b>	Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 1560, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection.**

REASON(S) FOR FILING (please check proper box)

New Well ..... <input type="checkbox"/>	Change in Ownership ..... <input type="checkbox"/>
Change in Transporter (check one)	Other (explain below)
Oil ..... <input checked="" type="checkbox"/> Dry Gas .... <input type="checkbox"/>	
Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/>	

Remarks

**Oil transporter to be changed effective August 1, 1963.**



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 31 day of July, 19 63.

OIL CONSERVATION COMMISSION		By
Approved by	 <b>Assistant District Superintendent</b> <b>Skelly Oil Company</b>	Title
Title		Company
Date		Address
<b>Supervisor Dist. # 3</b>  <b>JUL 31 1963</b>		<b>Box 730, Hobbs, New Mexico</b>

NEW MEXICO OIL CONSERVATION COMMISSION

Date July 23, 1963

New Mexico Oil Conservation Commission

1000 Rio Brazos Road

Aztec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts in and to be hereinafter stated.

That during the months of July 1963, Scott Bros. Drilling Company ran the following surveys for Skelly Oil Company on their Navajo "np" lease, Well No. 8 in SW 1/4 of SW 1/4 of Section 35-32N-17W NMPN, Many Rocks Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
<u>500'</u>	<u>1/4</u>		
<u>1000'</u>	<u>1-1/4</u>		
<u>1500'</u>	<u>1-3/4</u>		



Subscribed and sworn to before me this 23 day of July 1963

Jesse M. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

J. W. George  
Name: Assistant District Superintendent  
Position:

Box 730, Hobbs, New Mexico  
Address:

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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo</b>	Well No. <b>8</b>
Unit Letter <b>W</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>	

Pool <b>Many Rocks Gallup</b>	Kind of Lease (State, Fed, Fee) <b>Federal</b>
----------------------------------	---

If well produces oil or condensate give location of tanks	Unit Letter <b>W</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>
--	-------------------------	----------------------	-------------------------	----------------------

Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>	Address (give address to which approved copy of this form is to be sent)
<b>Shell Oil Company</b>	<b>Box 1588 - Farmington, New Mexico</b>

**Is Gas Actually Connected? Yes ☐ No ☒**

Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>	Date Connected	Address (give address to which approved copy of this form is to be sent)
<b>None</b>		

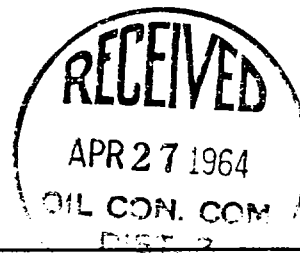
If gas is not being sold, give reasons and also explain its present disposition:

**Waiting on gas connection - Gas being vented.**

**REASON(S) FOR FILING (please check proper box)**

New Well ☐ Change in Ownership ☐  
 Change in Transporter (check one) Other (explain below) ☐  
 Oil ☒ Dry Gas ☐  
 Casing head gas ☐ Condensate ☐

TRANSPORTER CHANGED FROM EL PASO  
 OIL COMPANY TO SHELL PIPE LINE  
 CORPORATION EFFECTIVE 12/31/63



Remarks <b>Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.</b>
--

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 24th day of April, 1964.

OIL CONSERVATION COMMISSION		By <b>Charles J. Love</b>
Approved by <b>Original Signed Emery C. Arnold</b>		Title <b>Dist. Engineer</b>
Title <b>Supervisor Dist. # 3</b>		Company <b>Skelly Oil Company</b>
Date <b>APR 27 1964</b>		Address <b>Box 730 - Hobbs, New Mexico</b>



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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

I. Operator  
Getty Oil Company  
Address  
Box 3360, Casper, Wyoming 82602  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recon., elion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
If change of ownership give name and address of previous owner  
Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE  
Lease Name  
Navajo "P"  
Well No.  
8  
Pool Name, Including Formation  
Many Rocks Gallup  
Kind of Lease  
Federal  
Lease No.  
14-200-600-3540  
Location  
Unit Letter  
M  
Feet From The  
600  
South  
Line and  
660  
Feet From The  
West  
Line of Section  
35  
Township  
32N  
Range  
17W  
NMPM,  
San Juan  
County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Shell Pipeline Corp.  
Address (Give address to which approved copy of this form is to be sent)  
Box 1588, Farminoton, NM  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐  
Address (Give address to which approved copy of this form is to be sent)  
If well produces oil or liquids, give location of tanks.  
Unit  
C  
Sec.  
34  
Twp.  
32N  
Rge.  
17W  
Is gas actually connected?  
When

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, RAB, 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 10% allowable for this depth or be for full 24 hours)  
Date First New Oil Run To Tanks  
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-MMCF  
GAS WELL  
Actual Prod. Test-MMCF/D  
Length of Test  
Bbls. Condensate/MMCF  
Gravity of Condensate  
Testing Method (pilot, back pr.)  
Tubing Pressure (ft-in)  
Casing Pressure (ft-in)  
Choke Size

VI. CERTIFICATE OF COMPLIANCE  
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  
Area Superintendent  
2/4/77  
OIL CONSERVATION COMMISSION  
APPROVED  
BY  
TITLE  
This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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OPERATOR	3
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

Lease Name Navajo "p"	Well No. 8	Pool Name, including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Federal	Lease No. 14-20-600-3540
Location Unit Letter <u>M</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Shell Pipeline Corporation	P.O. Box 1588, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	C 34 32N 17W

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

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 Tanks	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

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

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED <u>SEP 12 1979</u> , 19	
<u>James P. Hooley</u> (Signature) <u>co. operator</u> (Title) <u>Sept 11, 1979</u> (Date)		BY <u>Original Signed by A. R. Kendrick</u> TITLE <u>SUPERVISOR DISTRICT # 3</u>	
		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

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	GAS	
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I.

Operator  
WTR OIL COMPANY

Address:  
Drawer LL, Cortez, Colorado 81321

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input checked="" type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "p"	Well No. 8	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location				
Unit Letter M	660	Feet From The South	Line and 660	Feet From The West
Line of Section 35	Township 32N	Range 17W	NMPM,	San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Ciniza Pipe Line, Inc.	P.O. Box 1887, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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-MVDF	Gravity of Condensate
Testing Method (Flow, pump, etc.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

VI. CERTIFICATION

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

Office Manager

24-12

OIL CONSERVATION COMMISSION

AUG 25 1982

Original Signed by FRANK T. CHAVEZ  
SUPERVISOR DISTRICT #3

This form is to be filed in compliance with RULE 1104.  
If a request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviation tests for the well in accordance with RULE 111.  
All wells of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out Sections I, II, III, and VI for changes of owner, well name, number, or transporter, or other such change of condition.  
Supplemental Form C-104 must be filed for each pool in multiply

NO. OF COPIES RECEIVED		
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TRANSPORTER	OIL	
	GAS	
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PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I.

Operator BayStar Petroleum Corporation		
Address P. O. Box 2975, Corpus Christi, Texas 78403		
Reason(s) for filing (Check proper box)		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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 8	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location Unit Letter M ; 660 Feet From The South Line and 660 Feet From The West Line of Section 35 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1887, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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.	Gravity of Condensate

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)  
Michael H. North, President  
(Title)  
May 2, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAY 06 1985  
BY Frank J. [Signature]  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

ILLEGIBLE

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**SUNDRY NOTICES AND REPORTS, OIL WELLS**  
(Do not use this form for proposals to drill or to deepen or plug up or to change the size of a well.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

**RECEIVED**

14-25-1657-7500

6. IF INDIAN, ALLOTTEE OR TRUST NAME  
Navajo

7. UNIT AGREEMENT NAME

8. FIELD OR LEASE NAME  
Navajo P

9. WELL NO.  
P#8

10. FIELD AND POOL, OR WILDCAT  
Mant-Kocks

11. SEC., T., R., OR BLM. AND SURVEY OR AREA  
35-T32N-P4E-W

12. COUNTY OR PARISH  
San Juan

13. STATE  
NM

1. NAME OF OPERATOR  
Bay Star Petroleum Corporation

2. ADDRESS OF OPERATOR  
P.O. Box 9975 Lordsburg, Texas 78403

3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
660FS/660FW from the SW/4 of Section 35

4. PERMIT NO.

5. ELEVATIONS (Show whether OF, AT, OR, etc.)  
5,862 GK

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACURE TREAT	<input type="checkbox"/>	FRACURE TREATMENT	<input checked="" type="checkbox"/>
SHOOT OR ACIDIZ	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input checked="" type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		

(NOTE: Report results of multiple completion or well completion or recompletion reports and log, etc.)

1. Describe proposed or completed operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and 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.)

Date of operation was 7/18/85. Pumped 18 barrels of H<sub>2</sub>O down the backside and fill it to the top. Packer held at 1675. Mixed 126 gallons of water with Turflow chemical. Pumped chemical down 2 3/8" tubing. Pressured up to 450 psi. Displaced chemical with 300 gallons of water at approximately 1/4 barrel per minute. Pressure at final shut-in was 475 psi. Left in over night and swabed dry the following day. Put back in 7/19/85.

Flow rate after treatment: 3 BOPD 15 BW

**RECEIVED**

AUG 19 1985

OIL CO.

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

SIGNED [Signature] TITLE Geologist

ACCEPTED FOR RECORD

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE AUG 16 1985

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA

BY [Signature]

\*See Instructions on Reverse Side

NMOCC

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	GAS
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

Operator A.P.A. Development Corporation		0011 1588
Address P.O. Box 215, Cortez, Colorado 81321		OIL CON. DIV.
Reason(s) for filing (Check proper box)		DIST. 9
<input type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 8	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Navajo	Lease No. 14-20-600-3540
Location Unit Letter <u>M</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, NM 87413	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34
	Twp. 32N	Rge. 17W

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Patricia B. Woolley  
(Signature)  
Operator  
(Title)  
10-12-88  
(Date)

OIL CONSERVATION DIVISION

OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Samuel J. Smith  
TITLE SUPERVISION DISTRICT #3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms 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 A.P.A. Development Inc.		Well API No.
Address P.O. Box 215, Cortez, CO 81321		
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 checked="" 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 Navajo "P"	Well No. 8	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Nava jo State, Federal or Fee 14	Lease No. 20-600-3540
Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giant Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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/MCF	Gravity of Condensate
Testing Method (prior, 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.

Signature  
Patrick B. Woosley  
Printed Name  
8/7/90  
Date  
Operator  
(303) 565-2458  
Title  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 28 1990  
By  
SUPERVISOR DISTRICT 13  
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.

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 A.P.A. Development, Inc.		Well API No. 300451115400S1
Address P.O. Box 215, Cortez, CO 81321		
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 checked="" 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 Navajo "P"	Well No. 8	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-600-3540
Location Unit Letter <u>M</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 370 - 17th St., Ste 5300, Denver, CO 80202-5653					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.D.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 DEC 14 1993

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pw.)	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.

Signature Patrick Woosley Operator  
Printed Name Patrick Woosley Title  
12/6/93 303-565-2458  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 14 1993

By Brian J. Shum  
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.





APA Development.  
NAVASO P #9.  
F-35-32N 17W.  
1980N 1980W  
45-11191

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

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo Tribe

7. If Unit or CA, Agreement Designation

8. Well Name and No.

9 Navajo P

9. API Well No.

30045 11191

10. Field and Pool, or Exploratory Area

11. County or Parish, State

San Juan, NM

**SUBMIT IN TRIPLICATE**

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator APA Development Corp.

% NMOCO

3. Address and Telephone No.

1000 Rio Brazos Rd. Aztec NM 87410 334-6178

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

35 - 32N - 17W 1980/N - 1980/W

**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

☐ 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.)\*

See attached plugging procedure.

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

Signed NMOCO Contractor Plugging Date 8/11/00

Date 8/11/00

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_  
Conditions of approval, if any:

Date 8/17/00

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

NMOCO

API NUMBER 30-045-11191

OPERATOR NAME APA DEVELOPMENT CORP

WELL NUMBER

9

PROPERTY NAME NAVAJO P

SECTION 35 TOWNSHIP 32N

RANGE 17W

FOOTAGE 1980 FNL 1980 FWL UL "F"

Sur Csg OD NA HOLE	7 5/8	XX			XX
SUR CSG TD	28	XX			XX
SUR CSG WT	17.7	XX			XX
TOP OF CMT	0	XX			XX
ACTUAL		XX			XX
CACULATED	8 SX	XX			XX
PROD CSG OD 6 1/4	4 1/2	XX			XX
PROD CSG TD	1743	XX			XX
PROD CSG WT	9.5	XX			XX
TOP OF CMT	888	XX	XX	XX	XX
FORMATION TOP	ACTUAL	EST	XX	XX	
GALLUP 1353	CACULATED	100SX	XX	XX	
MANCOS 226'	PERF TOP	1688	XX	XX	
	PERF BOTTOM	1694	XX	XX	
	PACKER		XX	XX	
	TYPE OF PLUG		XX	XX	
	CIBP & CMT		XX	XX	
	CMT		XX	XX	

### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOOH W/TUBING, PICK UP WORK STRING, CIRC HOLE

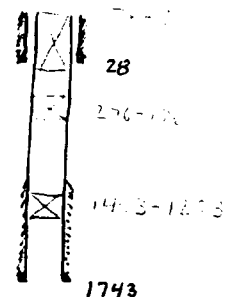
SPOT 14 SX PLUG 1403-1443 WOC TAG, FILL AS REQUIRED

PERF @ 276 PUMP 32 SX PLUG, 276-176, 18 SX OUTSIDE, 14 SX INSIDE CSG

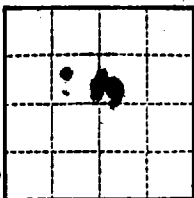
PERF @ 78' CIRC CEMENT TO SURFACE, EST 17 SX

CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS

Close pits according to guidelines: Clean and level location



(SUBMIT IN TRIPLICATE)



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_

Navajo - Wt

Allottee Mountain Tribal

14-55-400-3440

Lease No. \_\_\_\_\_

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

U. S. GEOLOGICAL SURVEY  
FARMINGTON, NEW MEXICO

July 15, 1963

Well No. 9 is located 1900 ft. from [N] line and 1900 ft. from [W] line of sec. 35

14 Sec. and Sec. No. 14 (Twp.) 17N (Range) 10W (Meridian)  
Undersaturated Gullup (Field) San Juan (County or Subdivision) New Mexico (State or Territory)

The elevation of the derrick floor above sea level is 5792 ft. (est.)

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 9 to around 1725' to test Gullup formation.

Our casing program is as follows:

- 20' - 7-8/16" OD 17.75 Spiral Weld Casing - to be cemented with 10 sacks regular cement.
- 1725' - 4-1/2" OD 9.50 2-3/8 Casing - to be cemented with 75 sacks regular cement w/46 gal and 25% gilsonite and 25 sacks regular w/25 calcium chloride.

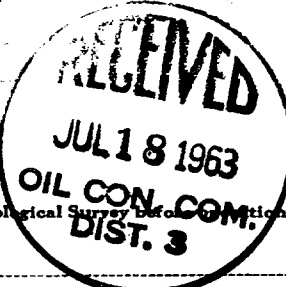
ILLEGIBLE

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SHELLEY OIL COMPANY

Address Box 720

Hobbs, New Mexico



By J. W. George  
Title Assistant District Superintendent

# NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

### SECTION A.

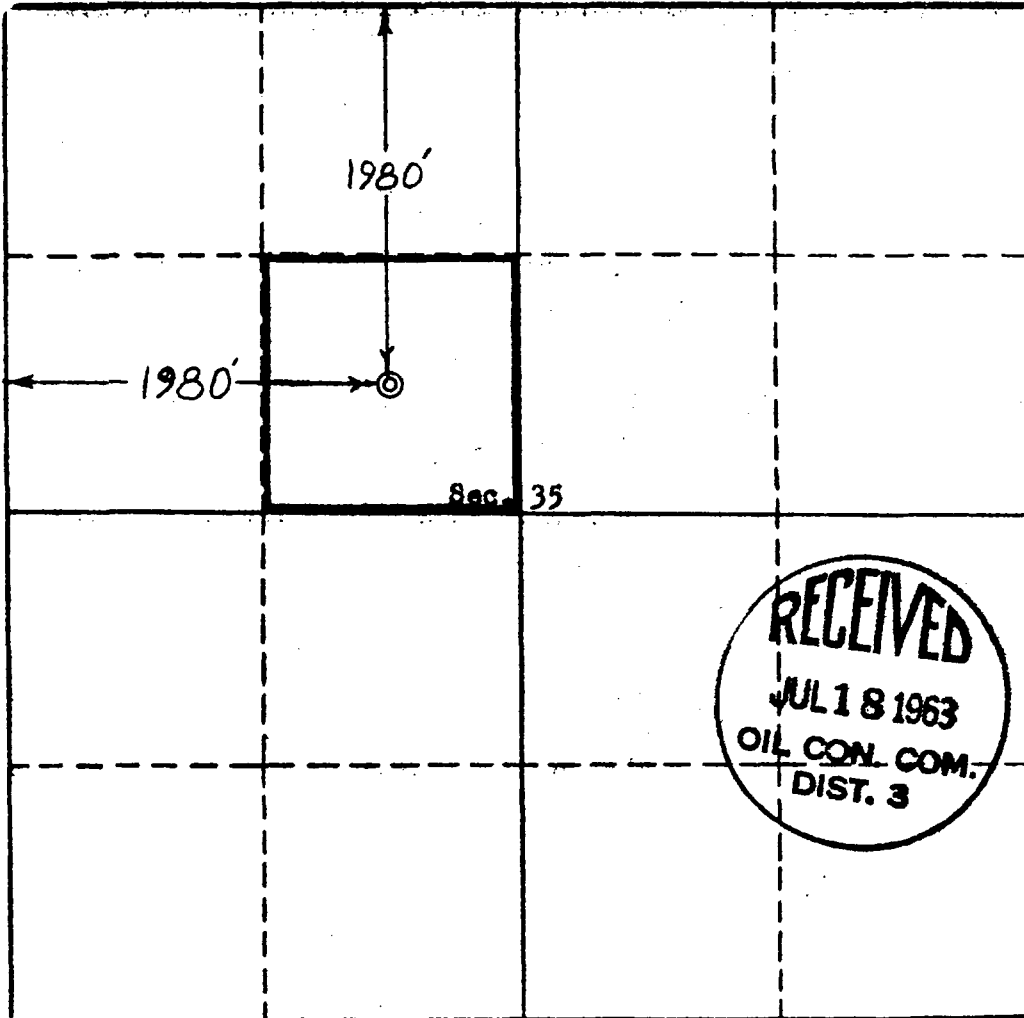
Operator Skelly Oil Company Lease Navajo "P"  
 Well No. 9 Unit Letter P Section 35 Township 32 North Range 17 West NMPM  
 Located 1980 Feet From North Line, 1980 Feet From West Line  
 County San Juan G. L. Elevation 5792 Dedicated Acreage 40 Acres  
 Name of Producing Formation Gallup Pool Undesignated Gallup

1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_. If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

### SECTION B.



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY  
(OPERATOR)

*J. W. George*  
(REPRESENTATIVE)

Box 730, Hobbs, New Mexico

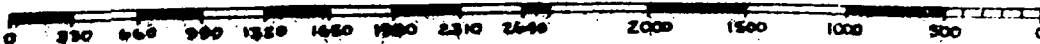
This is to certify that the well location shown in the plat in Section B was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed July 13, 1963

**Four States Engineering Co.**  
FARMINGTON, NEW MEXICO

*Emory V. Eichelbark*  
REGISTERED ENGINEER OR  
LAND SURVEYOR

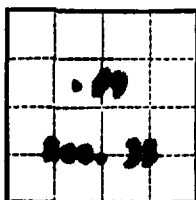
Certificate No. 3602



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_  
Allottee Navajo Tribe  
Lease No. 14-00-000-0000



SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	IX
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	<u>Perforating &amp; Treating</u>	IX

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Navajo, New Mexico August 7, 1962

Well No. 9 is located 1900 ft. from N line and 1900 ft. from W line of sec. 35

SE 1/4 Sec. 35  
(1/4 Sec. and Sec. No.)

200 17W  
(Twp.) (Range)

N.M.P.M.  
(Meridian)

Many Forks Gallup  
(Field)

San Juan  
(County or Subdivision)

New Mexico  
(State or Territory)

RECEIVE

AUG 9 1963

The elevation of the derrick floor above sea level is 5777 ft. 00

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

Well spudded July 14, 1963. Set 7-1/2" OD casing at 20' and cemented with 8 sacks by hand. W.C.C. Drilled to 1400'.

1400' - 1401' - 1730' (20') - 1730' 12'

Top - 5' - Sandy shale

Next - 4' - Gray sand, oil saturated

Next - 4' - Gray sand, tight, partly oil saturated with horizontal fractures

Next - 7' - Shale with lime streaks

Reached total depth of 1730' on July 18, 1963. Set 4-1/2" OD casing at 1730' and cemented with 100 sacks. W.C.C. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1730'. P.B.T.D. 1730'. Perforated 4-1/2" OD casing from 1600'-1604' for a total of 6' & 12 holes. Treated through 4-1/2" OD casing ports. 1600'-1604' with 40,970 gallons of lease oil and 40,000 20/40 sand and 6 - 7/8" ball sealers.

After recovering all lease oil well pumped 120 barrels of oil in 24 hours.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 730

Navajo, New Mexico

By (ORIGINAL SIGNED) H. E. Aab

Title Dist. Supt.

ILLEGIBLE

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*B.T.*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Survey 570</b>		Well No. <b>9</b>	
Unit Letter <b>7</b>	Section <b>25</b>	Township <b>30N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>6</b>	Section <b>24</b>	Township <b>30N</b>	Range <b>17W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>El Paso Products Pipeline Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1540, Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>			Date Connected	Address (give address to which approved copy of this form is to be sent)			

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection**

**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate.. ☐

Change in Ownership ..... ☐  
 Other (explain below)

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **9th** day of **August**, 19**63**.

OIL CONSERVATION COMMISSION		By
Approved by	Original Signed Emery C. Arnold	<i>J. W. George</i>
Title		Assistant District Superintendent
Supervisor Dist. # 3		<b>SHelly OIL COMPANY</b>
Date		Address
<b>AUG 6 1963</b>		<b>Box 730, Hobbs, New Mexico</b>

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PROBATION OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

## REQUEST FOR (OIL) - ~~EXCESS~~ ALLOWABLE

# ILLEGIBLE

New Well  
~~EXCESS~~

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico  
(Place)

8-5-63  
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company  
(Company or Operator)

Navajo "P"  
(Lease)

Well No. 9, in 8<sup>1</sup>/<sub>4</sub> NW 1/4,

T. 32N, R. 17W, NMPM, Many Rocks Gallup Pool

San Juan

County. Date Spudded 7-16-63

Date Drilling Completed 7-18-63

Please indicate location:

Elevation 5790' KB Total Depth 1730' PBD 1736'

Top Oil/Gas Pay 1660' Name of Prod. Form. Gallup

### PRODUCING INTERVAL -

Perforations 1660'-1694'

Open Hole --- Depth Casing Shoe 1743' Depth Tubing 1660'

### OIL WELL TEST -

Natural Prod. Test: --- bbls. oil, --- bbls water in --- hrs, --- min. Size ---

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 120 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size ---

### GAS WELL TEST -

Natural Prod. Test: --- MCF/Day; Hours flowed --- Choke Size ---

Method of Testing (pitot, back pressure, etc.): ---

Test After Acid or Fracture Treatment: --- MCF/Day; Hours flowed ---

Choke Size --- Method of Testing: ---

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated with 40,950 gals lease oil & 40,000 20-40 sand.

Casing Press. --- Tubing Press. --- Date first new oil run to tanks August 3, 1963

Oil Transporter El Paso Products Pipeline Company

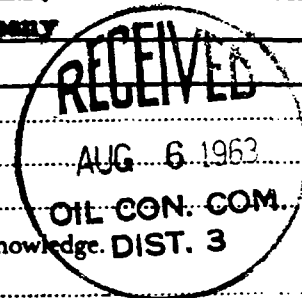
Gas Transporter ---

1960' FWL & 1960' FWL  
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	S&S
7-5/8"	21'	8
4-1/2"	1737'	100
2-3/8"	1667'	---

Remarks: Well pumped 120 bbls. in 24 hours.



I hereby certify that the information given above is true and complete to the best of my knowledge. DIST. 3

Approved: AUG 5 1963, 19

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

SKELLY OIL COMPANY

(Company or Operator)

By: J. W. George  
(Signature)

Title Assistant District Superintendent

Send Communications regarding well to:

Name Skelly Oil Company

Address Box 730, Hobbs, New Mexico



DEV. ACTION AFFIDAVIT

Date August 5, 1963

New Mexico Oil Conservation Commission

1000 Rio Grande Road

Astos, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

ILLEGIBLE

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of July 1963, South Area, Drilling Co. ran the following surveys for Skelly Oil Company on their lease "A" lease, Well No. 9, in SE 1/4 of SW 1/4 of Section 15-35-17N NMPM, New Mexico Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
<u>500'</u>	<u>1</u>		
<u>1000'</u>	<u>1-1/4</u>		
<u>1500'</u>	<u>1</u>		

Subscribed and sworn to before me this 5th day of August 19 63

Belle I. Hume  
Notary Public in and for said County and State

My Commission expires: 9/12/66

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

J. W. George  
Name

Assistant District Superintendent  
Position

Box 720, Hobbs, New Mexico  
Address



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. <b>1420-670-3540</b>
2. NAME OF OPERATOR <b>Skelly Oil Company</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Mountain Tribal</b>
3. ADDRESS OF OPERATOR <b>Box 730 - Hobbs, New Mexico</b>		7. UNIT AGREEMENT NAME <b>None</b>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>1900' FWL &amp; 1900' FWL Sec. 35-32N-17W</b>		8. FARM OR LEASE NAME <b>Navyjo "P"</b>
14. PERMIT NO.		9. WELL NO. <b>9</b>
15. ELEVATIONS (Show whether DF, RT, CR, etc.) <b>5797' DF</b>		10. FIELD AND POOL, OR WILDCAT <b>Many Rocks Gallup</b>
		11. SEC., T., R., M., OR BLE, AND SURVEY OR AREA <b>Sec. 35-32N-17W</b>
		12. COUNTY OR PARISH <b>San Juan</b>
		13. STATE <b>New Mexico</b>

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

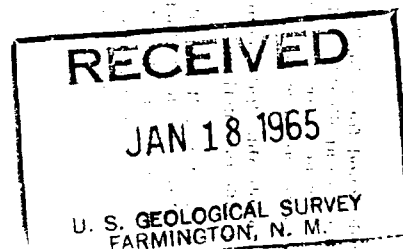
(Other) **Convert well to Water Injection**

(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 pertinent to this work.)\*

We plan to pull the rods and tubing out of this well. We will then install water injection equipment and inject water through 4-1/2" OD casing perfs, 1688-1694' into the Gallup Formation.

This well will be a Water Injection Well for the Many Rocks Gallup Pressure Maintenance Project No. 3 in the Many Rock Gallup Oil Pool, San Juan County, New Mexico.



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

SIGNED (ORIGINAL) **H. E. Aab**TITLE **Dist. Superintendent**DATE **JAN 15 1965**

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_


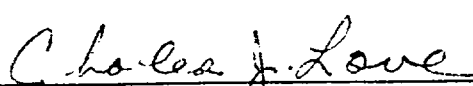
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FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110  
(Rev. 7-60)

B.T.

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "np"</b>		Well No. <b>9</b>	
Unit Letter <b>np</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>np</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1588 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> <b>None</b>		Date Connected	Address (give address to which approved copy of this form is to be sent)				
If gas is not being sold, give reasons and also explain its present disposition:  <b>Waiting on gas connection - Gas being vented.</b>							
<p align="center">REASON(S) FOR FILING (please check proper box)</p> <div style="display: flex; justify-content: space-between;"> <div> <p>New Well ..... <input type="checkbox"/></p> <p>Change in Transporter (check one)  Oil ..... <input checked="" type="checkbox"/> Dry Gas ..... <input type="checkbox"/>  Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/></p> </div> <div> <p>Change in Ownership ..... <input type="checkbox"/></p> <p>Other (explain below)</p> </div> </div>							
<div style="text-align: right;">  </div>							
Remarks  <b>Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.</b>							
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the <b>24th</b> day of <b>April</b> , 19 <b>64</b> .							
OIL CONSERVATION COMMISSION				By			
Approved by <b>Original Signed Emery C. Arnold</b>				 Title <b>Dist. Engineer</b>			
Title <b>Supervisor Dist. # 3</b>				Company <b>Skelly Oil Company</b>			
Date <b>APR 27 1964</b>				Address <b>Box 730 - Hobbs, New Mexico</b>			

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

1420-670-3540

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Mountain Tribal

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo "P"

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

Many Rocks Gallup

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

Sec. 35-32N-17W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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

Shelly Oil Company

3. ADDRESS OF OPERATOR

Box 730 - Hobbs, New Mexico

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

1980' FHL & 1987' FHL Sec. 35-32N-17W

14. PERMIT NO.

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

5797' DF

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Convert well to Water Injection

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

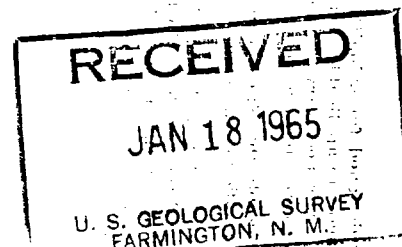
ABANDONMENT\*

(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 pertinent to this work.)\*

We plan to pull the rods and tubing out of this well. We will then install water injection equipment and inject water through 4-1/2" OD casing perfs. 1688-1694' into the Gallup Formation.

This well will be a Water Injection Well for the Many Rocks Gallup Pressure Maintenance Project No. 3 in the Many Rock Gallup Oil Pool, San Juan County, New Mexico.



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

SIGNED (ORIGINAL) (SIGNED) H. E. Aab

TITLE Dist. Superintendent

DATE JAN 15 1965

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. <b>1420-600-3540</b>
2. NAME OF OPERATOR <b>Skelly Oil Company</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Mountain Tribal</b>
3. ADDRESS OF OPERATOR <b>Box 730 - Hobbs, New Mexico</b>		7. UNIT AGREEMENT NAME <b>-</b>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  <b>1980' FNL &amp; 1980' FNL Sec. 35-32N-17W</b>		8. FARM OR LEASE NAME <b>Navajo #1</b>
14. PERMIT NO.		9. WELL NO. <b>9</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>5787' DF</b>		10. FIELD AND POOL, OR WILDCAT <b>Many Rocks Gallup</b>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 35-32N-17W</b>
		12. COUNTY OR PARISH <b>San Juan</b>
		13. STATE <b>New Mexico</b>

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

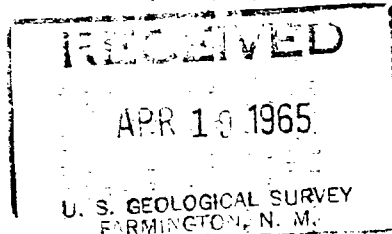
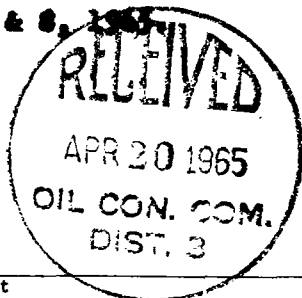
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <b>Well converted to Water Injection.</b>	
(Other) <input type="checkbox"/>		(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 pertinent to this work.)\*

Moved in and rigged up pulling unit. Pulled rods and tubing. Installed Water Injection Equipment and started injecting water into the Gallup Formation through 4-1/2" OD casing perfs. 1688-1694' on April 12, 1965.

This well is a Water Injection Well for the Many Rocks Gallup Pressure Maintenance Project No. 3 Area "A" in the Many Rocks Gallup Oil Pool.

Date work performed - April 7 & 8, 1965



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

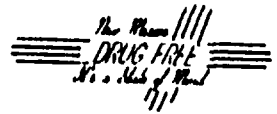
SIGNED (ORIGINAL) H. E. Aab TITLE Dist. Superintendent DATE April 15, 1965

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE



BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

December 4, 1992

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells

Navajo AA #4, E-17-32N-17W  
Navajo AA #13, B-20-32N-17W  
Navajo #11, E-27-32N-17W  
Navajo #6, K-27-32N-17W  
Navajo #3, O-27-32N-17W  
Navajo #12, I-28-32N-17W  
Navajo P #6, J-35-32N-17W

Navajo M #2, K-33-32N-17W  
Navajo M #7, B-34-32N-17W  
Navajo #10, J-27-32N-17W  
Navajo P #11, D-35-32N-17W  
~~Navajo P #9, F-35-32N-17W~~  
Navajo P #7, J-35-32N-17W

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by April 1, 1992 and work completed by December 31, 1993.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File  
David Catanach-UIC Director  
~~WIC File~~  
George Robin-EPA



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DIVISION  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

April 13, 1993

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells

Navajo AA #4, E-17-32N-17W	Navajo AA #13, B-20-32N-17W
Navajo #11, E-27-32N-17W	Navajo #10, J-27-32N-17W
Navajo #6, K-27-32N-17W	Navajo #3, O-27-32N-17W
Navajo #12, I-28-32N-17W	Navajo M #2, K-33-32N-17W
Navajo M #7, B-34-32N-17W	Navajo P #11, D-35-32N-17W
Navajo P #9, F-35-32N-17W	Navajo P #7, J-35-32N-17W
Navajo P #6, P-35-32N-17W	

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated. You are required to file for a permit to inject under Rule 701 prior to any injection.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by June 1, 1993 and work completed by June 1, 1994.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File  
David Catanach-UIC Director  
Well File  
David Holguin-EPA

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

5. Lease Designation and Serial No  
**14-20-600-3540**

6. If Indian, Allottee or Tribe Name

**NAVAJO**

7. If Unit or CA, Agreement Designation

8. Well Name and No.

**NAVAJO P # 9**

9. API Well No.

**3004511910051**

10. Field and Pool, or Exploratory Area

**MANY ROCKS**

11. County or Parish, State

**SAN JUAN, NM**

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other **WIW**

2. Name of Operator

**A.P.A. Development, Inc.**

3. Address and Telephone No

**P.O. Box 215, Cortez, CO 81321 303-565-2458**

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

**1980' FWL + 1980' FWL, Sec. 35, T 32N R17W**

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 \_\_\_\_\_
- ☐ 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.)

**Plan to T.A. until well can be conditioned  
back to water injection.**

**RECEIVED**  
**APR 9 1993**  
**OIL CON. DIV.**  
**DIST. 3**

**SEE ATTACHED FOR  
CONDITIONS OF APPROVAL**

**RECEIVED**  
**BLM**  
**APR 09 1993 11:37**  
**070 HALLAM BLVD, NM**

**THIS APPROVAL EXPIRES** **APR 01 1994**

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

Signed **Pat Woolley**  
(This space for Federal or State office use)

Title \_\_\_\_\_

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

**APPROVED**  
**AS AMENDED**

Date

**APR 06 1993**

**DISTRICT MANAGER**

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 statement or representation as to any matter within its jurisdiction.

\*See Instruction on Reverse Side

410000



UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA  
1235 LA PLATA HIGHWAY  
FARMINGTON, NEW MEXICO 87401

CONDITIONS OF APPROVAL:

This Temporary Abandonment approval is contingent upon conducting a casing integrity test by JUL 01 1993. Mark Kelly with the Farmington Office is to be notified at least 48 hours prior to conducting the casing integrity test (505-599-8907). If the casing test fails, you will be required to submit your plans to repair the casing or plug and abandon the well.

Office Hours: 7:45 a.m. to 4:30 p.m.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

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 different reservoirs.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

070 FARMINGTON, NM

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

Navajo "P"

8. Well Name and No.

#9

9. API Well No.

30045111910051

10. Field and Pool, or Exploratory Area

Many Rocks GA

11. County or Parish, State

San Juan NM.

1. Type of Well

☐ Oil Well ☐ Gas Well

☒ Other injection well

2. Name of Operator

A.P.A. Development, Inc.

3. Address and Telephone No.

P.O. Box 215 Cortez, CO. 81321 (303) 565-2458

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

1980' FNL, 1980' FWL Sec. 35, T32N R17W

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

☐ 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.)

Plan to plug well as follows:

1. equalize cement plug from 1736' to 1638'
2. pick up to 1637' circulate conditioned fluid to 50' from surface.
3. circulate cement 50' to surface.
4. Circulate cement 50' to surface between 4 1/2" and 7 5/8" casings.
5. Weld on dry hole marker and remediate location.

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

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

Signed Patricia Woolley

Title

Date 10/14/94

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title

APPROVED

OCT 25 1994

MANAGER

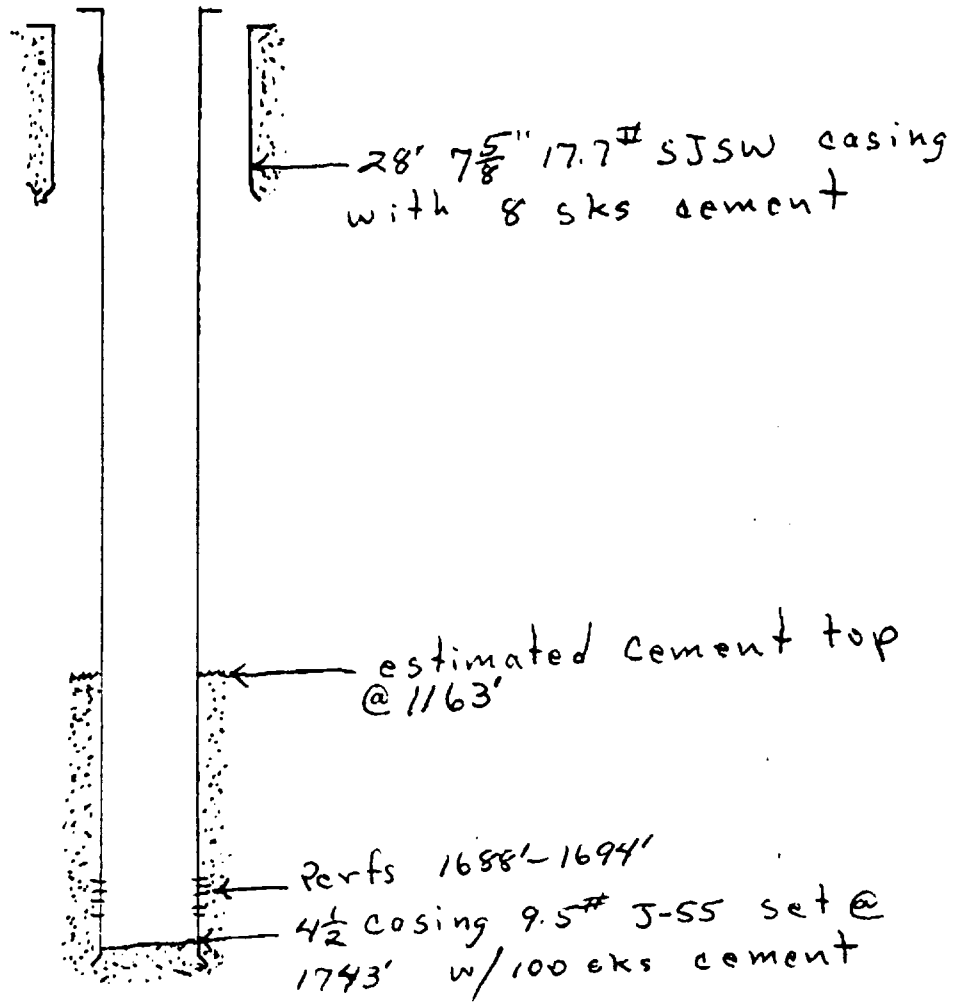
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

\*See Instruction on Reverse Side

Navajo P-9

Lease # 14-20-600-3540

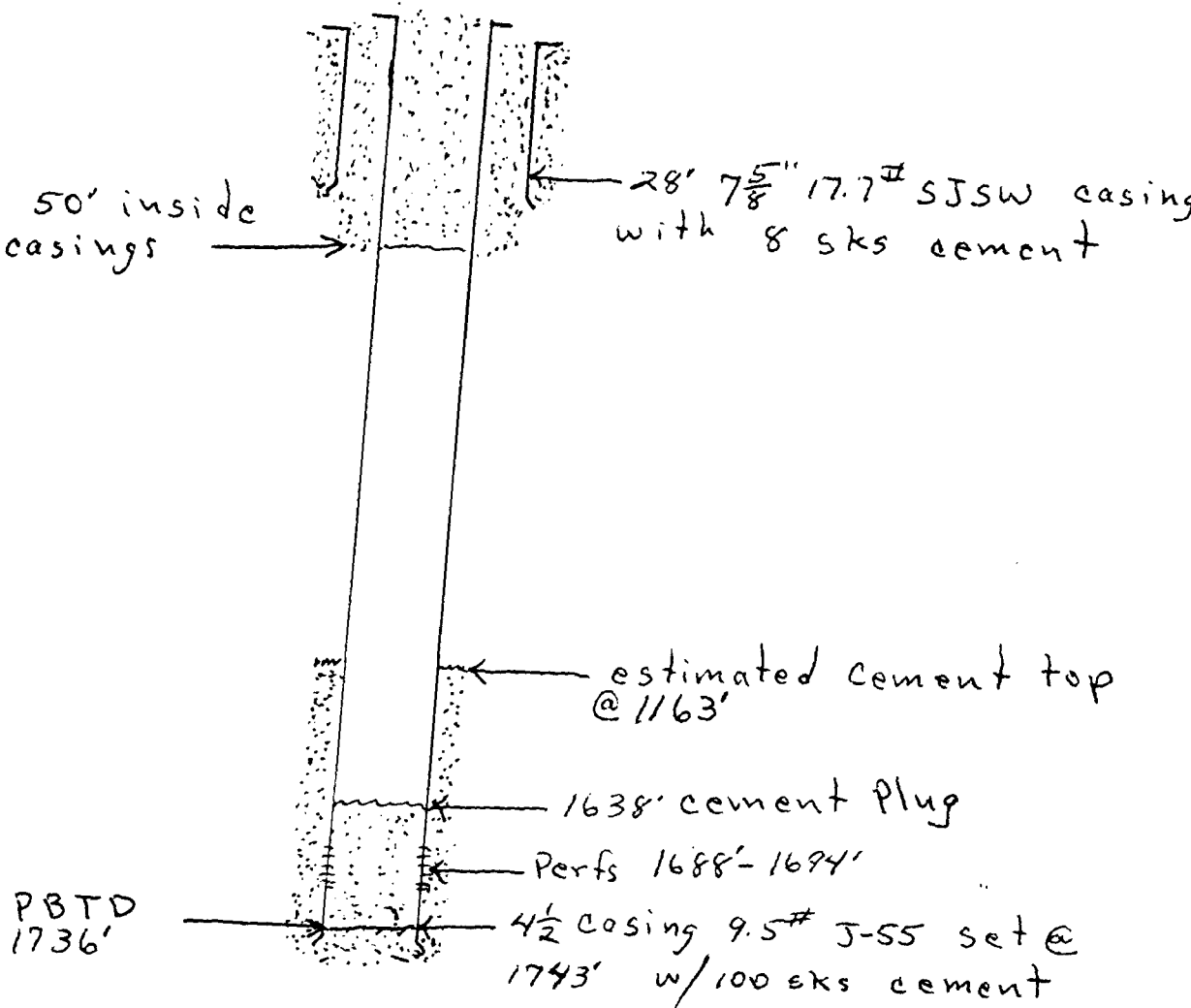
existing condition



Navajo P-9

Lease # 14-20-600-3540

Cement plug 50' inside  
and outside casings  
to surface.



**UNITED STATES DEPARTMENT OF THE INTERIOR**

**BUREAU OF LAND MANAGEMENT  
FARMINGTON DISTRICT OFFICE**

1235 La Plata Highway  
Farmington, New Mexico 87401

Attachment to Notice of

Re: Permanent Abandonment

Intention to Abandon

Well: **9 Navajo P**

**CONDITIONS OF APPROVAL**

1. Plugging operations authorized are subject to the attached "General Requirements for Permanent Abandonment of Wells on Federal and Indian Leases."

2. **Mike Flaniken** with the Farmington Office is to be notified at least 24 hours before the plugging operations commence (505) 599-8907.

3. The following modifications to your plugging program are to be made (when applicable):

1. **Tag top of cement plug @ 1638'.**

2. Spot a cement plug from 1396' to 1296' inside the casing plus 50 linear feet excess. (top of Gallup @ 1346')

3. Perforate @ 276' and place a cement plug from 276' to 176' inside and outside the casing, plus 100% excess cement in the annulus and 50 linear feet excess in the casing. ( Bottom of Point Lookout @ 226')

4. Extend surface plug from 78' to the surface on the inside and outside of the casing. (surface casing @ 28')

**Note:** The above modifications are minimum standards. It is acceptable to pump additional cement and combine plugs.

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

5. Lease Designation and Serial No.  
1420600 3540

6. If Indian, Allottee or Tribe Name  
NAVAJO TRIGAL

SUBMIT IN TRIPLICATE

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other *INV Well*

2. Name of Operator  
APA Dev, INC

3. Address and Telephone No.  
P.O. Box 1093 Shiprock NM 87429

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
NO 9 NAVAJO P 1980 FNL + 516 FWL 1980/W  
Sec 35 Lease 1420600-3540 T32N, R11W

8. Well Name and No.  
No 9 NAVAJO P

9. API Well No.  
30045 1191

10. Field and Pool, or Exploratory Area  
MANY ROCKS

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  
☐ 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.)\*

No 9 Navajo P - Key line well for repressuring  
This oil field will be used within 12 mo

RECEIVED  
JUN - 3 1997

OIL CON. DIV.  
DIST. 1

OIL CON. DIV., NM  
JUN - 2 11 3:00

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

Signed *William E. Spencer* Title *Pres*

Date *6-1-87*

(This space for Federal or State Use)  
*W. Spencer*

Approved by \_\_\_\_\_ Title \_\_\_\_\_  
Conditions of approval, if any:

Date *JUN - 4 1997*

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES REVIEWED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED

OCT 17 1988  
Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
A.P.A. Development Corporation  
Address  
P.O. Box 215, Cortez, Colorado 81321  
Reason(s) for filing (Check proper box)  
☐ New Well ☐ Change in Transporter of:  
☐ Recompletion ☐ Oil ☐ Dry Gas  
☒ Change in Ownership ☐ Casinghead Gas ☐ Condensate  
Other (Please explain)

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Navajo "P"</u>	Well No. <u>9</u>	Pool Name, including Formation <u>Mary Rocks Gallup</u>	Kind of Lease <u>Navajo</u>	Lease No. <u>14-20-600-3540</u>
Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>1980</u> Line and <u>North</u> Feet From The <u>West</u> Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Ciniza Pipe Line, Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1887, Bloomfield, NM 87413</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>C 34 32N 17W</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Patrick B. Nosal  
(Signature)  
Operator  
(Title)  
10-12-88  
(Date)

OIL CONSERVATION DIVISION

OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Sam J. Shum  
TITLE SUPERVISION DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

November 1983)  
Formerly O-311)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

STAMP IN REVERSE SIDE  
(Other instructions on re-  
verse side)

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.)

OIL WELL ☐ GAS WELL ☐ OTHER WIW

2. NAME OF OPERATOR  
APA Development Inc.

3. ADDRESS OF OPERATOR  
Box 215 Cortez CO. 81321

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface  
1980' FNL + 1980' FWL

Sec 35 T32N R17W

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, OR, etc.)

5. LEASE DESIGNATION AND SERIAL NO.

14-20-600-3540

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo "P"

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

Many Rocks Gailup

11. SEC., T., R., OR BLK. AND  
SUBST. OR AREA

35. T32N R17W

12. COUNTY OR PARISH 13. STATE

San Juan NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) WIW

PULL OR ALTER Casing ☐

MULTIPLE COMPLETE ☐

ABANDON ☐

CHANGE PLANT ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT ☐

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

17. WORK HERE 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.)

Plan to condition well back to active water injection.

RECEIVED

MAR 27 1992

OIL CON. DIV.  
DIST. 3

RECEIVED  
BLM  
92 MAR 17 PM 1:55  
019 FARMINGTON, N.M.

THIS APPROVAL EXPIRES APR 01 1993

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

SIGNED Pat Woolley

TITLE

DATE 3/13/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

MAR 26 1992

AREA MANAGER

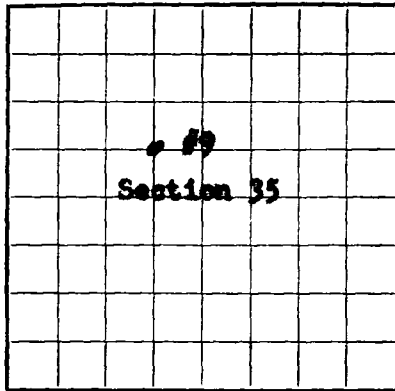
\*See Instructions on Reverse Side

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.

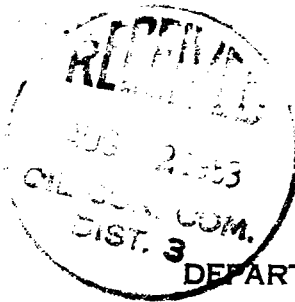
NMOOD



Form 9-330



LOCATE WELL CORRECTLY

Form approved,  
Budget Bureau No. 42-R355.4.U. S. LAND OFFICE Window RockSERIAL NUMBER 14-20-600-3540LEASE OR PERMIT TO PROSPECT NavajoUNITED STATES  
DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

RECEIVED

1963

U. S. GEOLOGICAL SURVEY  
WASHINGTON, D. C.

## LOG OF OIL OR GAS WELL

Company Shelly Oil Company Address Box 730 - Hobbs, New Mexico  
 Lessor or Tract Navajo "P" Field Maggie Rocks Gallup State New Mexico  
 Well No. 9 Sec. 35 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
 Location 1900 ft. XX of N Line and 1900 ft. XX of W Line of Section 35 Elevation 5797' DP  
 (Derrick floor relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon  
 so far as can be determined from all available records.

Signed (ORIGINAL) H. E. AabDate August 7, 1963Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

Commenced drilling July 16, 1963 Finished drilling July 18, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

ILLEGIBLE

No. 1, from 1682' to 1694' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
7-5/8	28	3	AMERICAN	100	REG	Surface	Surface	Surface	Surface
4-1/2	18	3	AMERICAN	100	REG	100	100	100	100
HISTORY OF OIL OR GAS WELL									

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8	28	2	Hand		

## PLUGS AND ADAPTERS

Heaving plug—Material ..... Length ..... Depth set .....

Adapters—Material ..... Size .....

## SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
<del>Treated through 4-1/2" OD casing perfor. 1688' - 1694' with 40,950 gallons of lease oil and 40,000' sand 20/40 sand and 6 - 7/8" ball cutters.</del>						

## TOOLS USED

Rotary tools were used from 0 feet to 1750 feet, and from ..... feet to ..... feet

Cable tools were used from ..... feet to ..... feet, and from ..... feet to ..... feet

## DATES

....., 19.....

Put to producing ..... August 3, 1969

The production for the first 24 hours was 120 barrels of fluid of which 99.9% was oil; .....% emulsion; .....% water; and .1% sediment. Gravity, °Bé. 41.2

If gas well, cu. ft. per 24 hours ..... Gallons gasoline per 1,000 cu. ft. of gas .....

Rock pressure, lbs. per sq. in. ....

## EMPLOYEES

Johnston, Driller ..... Driller

Oden, Driller ..... Driller

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	1346	1346	Sand & Shale
1346	1543	197	Sand & Shale - Top Middle Gallup - 1346'
1543	1688	145	Sand & Shale - Top Lower Gallup - 1543'
1688	1697	9	Sand & Shale - Top Tecite - 1688'
1697	1750	53	Sand & Shale - Top Sanasteo - 1697'
	1750	Total Depth	
	1736	Plug Back Total Depth	
		Geological Tops by Schlumberger Induction Electric Log.	

CORE NO. 1 - 1688' - 1705' (20') - RECOVERED - 18'

Top - 3' - Sandy shale

Next - 4' - Gray sand, oil saturated

Next - 4' - Gray sand, tight, partly oil saturated with horizontal fractures

Next - 7' - Shale with lime streaks

ILLEGIBLE

FROM—

TO—

TOTAL FEET

FORMATION

(OVER)

FORMATION RECORD—Continued

16-45004-6

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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

I. Operator  
Getty Oil Company  
Address  
Box 3360, Casper, Wyoming 82602  
Reason(s) for filing (Check proper box)  
New Well ☐ Change In Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change In Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
If change of ownership give name and address of previous owner  
Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE  
Lease Name  
Navajo "P"  
Well No.  
9  
Pool Name, Including Formation  
Many Rocks Gallup  
Kind of Lease  
Federal  
State, Federal or Fee  
14-200-600-3540  
Location  
Unit Letter  
F  
1980  
Feet From The  
North  
Line and  
1980  
Feet From The  
West  
Line of Section  
35  
Township  
32N  
Range  
17W  
NMPM,  
San Juan  
County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Shell Pipeline Corp.  
Address (Give address to which approved copy of this form is to be sent)  
Box 1588, Farmington, NM  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐  
Address (Give address to which approved copy of this form is to be sent)  
If well produces oil or liquids, give location of tanks.  
Unit  
C  
Sec.  
34  
Twp.  
32N  
Rge.  
17W  
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. ☐  
Date Spudded  
Date Compl. Ready to Prod.  
Total Depth  
P.B.T.D.  
Elevations (OF, KKB, RT, CR, 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 Tanks	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/MMCF  
Gravity of Condensate  
Testing Method (pilot, back pr.)  
Tubing Pressure (Shut-in)  
Casing Pressure (Shut-in)  
Choke Size

VI. CERTIFICATE OF COMPLIANCE  
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  
Area Superintendent  
2/4/77  
FEB 15 1977  
OIL CONSERVATION COMMISSION  
APPROVED  
BY ORIGINAL SIGNED BY N. E. MAXWELL, JR.  
TITLE  
This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

Lease Name Navajo "P"		Well No. 9	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee	Lease No. 14-20-600-3540
Location Unit Letter <u>F</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County					

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, NM 87401			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Pge. 17W	Is gas actually connected? When

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

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED <u>SEP 12 1979</u> , 19____	
		BY <u>Original Signed by A. R. Kendrick</u>	
		SUPERVISOR DISTRICT # 3	
		TITLE _____	

James P. Hooley  
(Signature)  
co. operator  
(Title)  
Sept-11-1979  
(Date)

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

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	GAS
OPERATOR	
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Operator BayStar Petroleum Corporation	
Address P. O. Box 2975, Corpus Christi, Texas 78403	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Injection Well
Recompletion <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 9	Pool Name, including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. 14-20-600-3540
Location Unit Letter <u>F</u> ; 1980 Feet From The <u>North</u> Line and 1980 Feet From The <u>West</u> Line of Section <u>35</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <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)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
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:

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)

Michael H. North, President  
(Title)

May 8, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

APPLICATION OF SKELLY OIL COMPANY  
TO EXPAND ITS MANY ROCKS-GALLUP  
PRESSURE MAINTENANCE PROJECT NO. 3  
IN THE MANY ROCKS-GALLUP OIL POOL  
IN SAN JUAN COUNTY, NEW MEXICO.

ADMINISTRATIVE ORDER  
PMX-13

ADMINISTRATIVE ORDER  
OF THE OIL CONSERVATION COMMISSION

Under the provisions of Order No. R-2664, Skelly Oil Company has made application to the Commission on November 9, 1964, for permission to expand its Many Rocks-Gallup Pressure Maintenance Project No. 3 in the Many Rocks-Gallup Oil Pool, San Juan County, New Mexico.

NOW, on this 30th day of December, 1964, the Secretary-Director finds:

1. That application has been filed in due form.
2. That satisfactory information has been provided that all offset operators have been duly notified of the application.
3. That objection lodged by the State Engineer has been withdrawn.
4. That the proposed injection wells are eligible for conversion to water injection under the terms of Order No. R-2664.
5. That the proposed expansion of the above-referenced pressure maintenance project will not cause waste nor impair correlative rights.
6. That the application should be approved.

IT IS THEREFORE ORDERED:

That the applicant, Skelly Oil Company, be and the same is hereby authorized to inject water into the Gallup formation through the following described wells for purposes of Pressure Maintenance, to wit:

Navajo "M" Well No. 8 located in the SE/4 NE/4 of Section 34,  
Navajo "M" Well No. 12 located in the NE/4 NW/4 of Section 34,  
Navajo "P" Well No. 7 located in the NW/4 SE/4 of Section 35,  
Navajo "P" Well No. 9 located in the SE/4 NW/4 of Section 35,  
and Navajo "P" Well No. 11 located in the NW/4 NW/4 of Section 35, all in Township 32 North, Range 17 West, NMPM,

DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.

STATE OF NEW MEXICO  
OIL CONSERVATION COMMISSION

*A. L. Porter, Jr.*  
A. L. PORTER, Jr.,  
Secretary-Director

RECEIVED  
APR 27 1992

OIL CON. DIV  
DIST. 3

SEAL

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 *APA Development Corp.*

*% NMOCO*

3. Address and Telephone No.

*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

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

*26-32N-17W 1980/5-660/W*

5. Lease Designation and Serial No.

*14-20-600-3540*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*10 Navajo P*

9. API Well No.

*30045 11256*

10. Field and Pool, or Exploratory Area

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 \_\_\_\_\_
- ☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOCO Contract Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date *8/17/00*

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

API NUMBER 30-045-11256

OPERATOR NAME APA DEVELOPMENT CORP WELL NUMBER

10

PROPERTY NAME NAVAJO P

SECTION 26 TOWNSHIP 32N RANGE 17W

FOOTAGE 1980 FSL 660 FWL UL "L"

	Sur Csg OD NA HOLE	7 5/8	XX			XX
	SUR CSG TD	28	XX			XX
	SUR CSG WT	17.7	XX			XX
	TOP OF CMT	0	XX			XX
	ACTUAL	CIRC	XX			XX
	CACULATED	45SX	XX			XX
	PROD CSG OD 6 1/4	4 1/2	XX			XX
	PROD CSG TD	1829	XX			XX
	PROD CSG WT	9.5	XX			XX
	TOP OF CMT	974	XX	XX	XX	XX
FORMATION TOP	ACTUAL	EST	XX		XX	
GALLUP 1447'	CACULATED	100SX	XX		XX	
MANCOS 337'	PERF TOP	1764	XX		XX	
	PERF BOTTOM	1769	XX		XX	
	PACKER		XX		XX	
	TYPE OF PLUG		XX		XX	
	CIBP & CMT		XX		XX	
	CMT		XX		XX	

#### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOO H W/RODS & TUBING, PICK UP WORKSTRING, CIRC HOLE

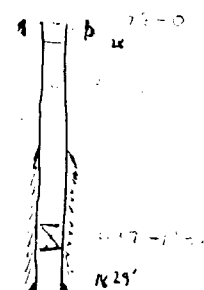
SPOT 14 SX PLUG 1497-1347, WOC TAG, FILL AS REQUIRED

PERF @ 387 PUMP 32 SX 387-287, 18 OUTSIDE CSG, 14 INSIDE CSG

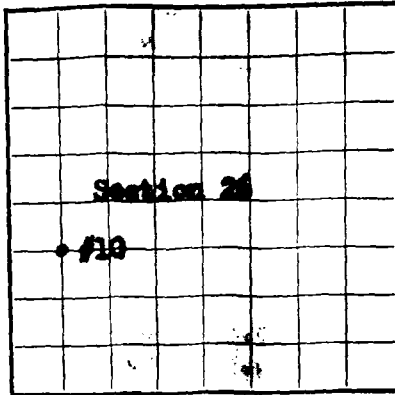
PERF @ 78' CIRC CEMENT TO SURFACE, EST 17 SX

CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS

Close pits according to guidelines: Clean and level location







LOCATE WELL CORRECTLY

RECEIVED

SEP 4 1963

OIL CON. COM.  
DIST. 3Form approved.  
Budget Bureau No. 42-R308.4.U. S. LAND OFFICE Window Rock  
SERIAL NUMBER 14-20-400-3540  
LEASE OR PERMIT TO PROSPECT \_\_\_\_\_

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY

RECEIVED

SEP 3 1963

## LOG OF OIL OR GAS WELL

U. S. GEOLOGICAL SURVEY  
WATER RESOURCES DIVISION

Company Shelly Oil Company Address Box 730 - Hobbs, New Mexico  
 Lessor or Tract Navajo 97 Field Many Rocks Gallup State New Mexico  
 Well No. 10 Sec. 26 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
 Location 1900 ft. N. of 10 Line and 440 ft. E. of W. Line of Section 26 Elevation 5903'  
 (Derrick base relative to sea level)  
 The information given herewith is a complete and correct record of the well and all work done thereon  
 so far as can be determined from all available records. (ORIGINAL)  
 Signed (SIGNED) H. E. Aab  
 Date August 29, 1963 Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

Commenced drilling July 29, 1963 Finished drilling August 1, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1764' to 1769' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

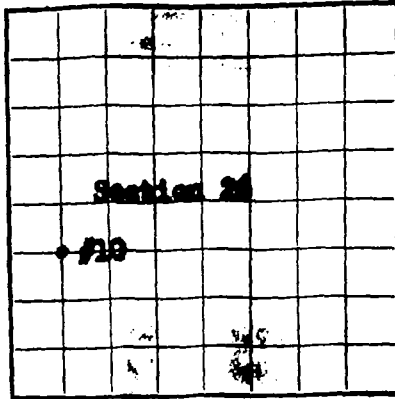
Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
7-5/8"	28	8	By Hand	100	Pump & Plug				
4-1/2"	18.29	100							

## MUDDING AND CEMENTING RECORD

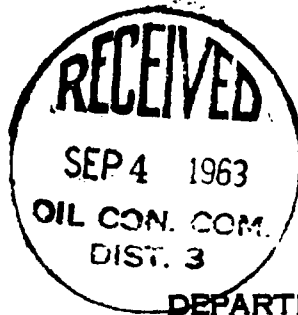
Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
7-5/8"	28'	8	By Hand		
4-1/2"	18.29'	100	Pump & Plug		

MARK

ILLEGIBLE



LOCATE WELL CORRECTLY



U. S. LAND OFFICE **Window Rock**  
SERIAL NUMBER **14-20-400-3540**  
LEASE OR PERMIT TO PROSPECT \_\_\_\_\_

UNITED STATES

DEPARTMENT OF THE INTERIOR

GEOLOGICAL SURVEY



SEP 3 1963

## LOG OF OIL OR GAS WELL

Company **Stally Oil Company** Address **Box 730 - Hobbs, New Mexico**  
Lessor of Tract **Navajo Co.** Field **Mary Rocks Gallup State New Mexico**  
Well No. **10** Sec. **26** T. **32N** R. **17W** Meridian **N.M.P.M.** County **San Juan**  
Location **2900** ft. **N.** of **131** Line and **440** ft. **E.** of **M** Line of **Section 26** Elevation **5901'**  
(Derrick floor relative to sea level)  
The information given herewith is a complete and correct record of the well and all work done thereon  
so far as can be determined from all available records. (ORIGINAL)  
Signed **H. E. Aab**

Date **August 29, 1963**Title **Expl. Sept.**

The summary on this page is for the condition of the well at above date.

Commenced drilling **July 29,** 19**63** Finished drilling **August 1,** 19**63**OIL OR GAS SANDS OR ZONES  
(Denote gas by G)

ILLEGIBLE

No. 1, from **1764'** to **1769'** No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

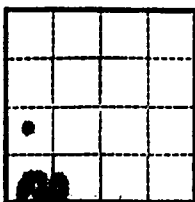
## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
<b>7-5/8"</b>	<b>28'</b>	<b>8</b>	<b>By Hand</b>		
<b>4-1/2"</b>	<b>1829'</b>	<b>100</b>	<b>Pump &amp; Plug</b>		

MARK



(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Form approved.  
Budget Bureau No. 42-R456.4.

Indian Agency \_\_\_\_\_

Mineral Rights \_\_\_\_\_

Allottee Mountain Tribe

Lease No. 14-22-100-310

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

U. S. GEOLOGICAL SURVEY

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA) FARMINGTON, NEW MEXICO

July 27, 1963

Well No. 20 is located 1900 ft. from S line and 660 ft. from W line of sec. 26  
SW/4 Sec. 26 22N 17W 108W  
 (4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Many Rocks Gallup San Juan New Mexico  
 (Field) (County or Subdivision) (State or Territory)

The elevation of the ground level above sea level is 5900 ft. GL (est.)

DETAILS OF WORK

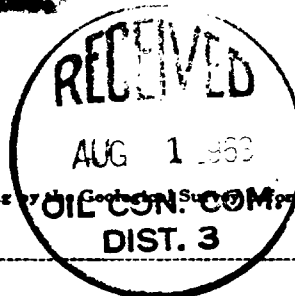
(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 20 to around 1825' to test Gallup formation.

Our casing program is as follows:

- 20' - 7-5/8" ID 27.75 Spiral Weld Casing - to be cemented with 10 sacks regular cement.
- 1825' - 4-1/2" ID 9.55 J-55 Casing - to be cemented with 75 sacks regular cement w/4% gel and 25% gilsonite and 25 sacks regular w/2% calcium chloride.

ILLEGIBLE



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY

Address Box 730

Hobbs, New Mexico

By J. W. George  
 Title Assistant District Superintendent

# NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

## SECTION A.

Date July 29, 1963

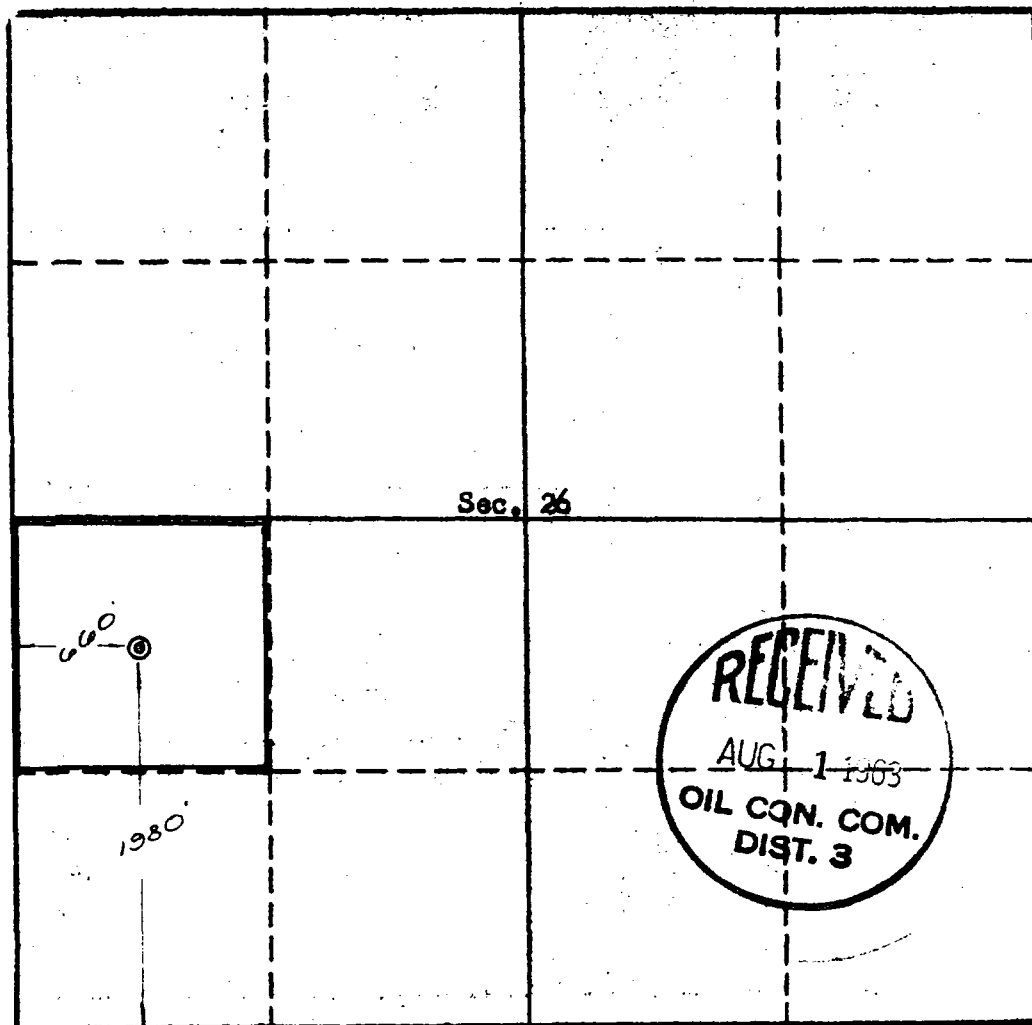
Operator Skelly Oil Company Lease Navajo #1  
 Well No. 10 Unit Letter 1 Section 26 Township 32 North Range 17 West NMPM  
 Located 1980 Feet From South Line 660 Feet From West Line  
 County San Juan G. L. Elevation 5903 Dedicated Acreage 40 Acres  
 Name of Producing Formation Gallup Pool Many Rocks Gallup

1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_. If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

## SECTION B.



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY

(OPERATOR)

*J. W. George*  
 (REPRESENTATIVE)  
 Box 730, Hobbs, New Mexico  
 (ADDRESS)

THIS IS TO CERTIFY THAT THE WELL LOCATION SHOWN ON THE PLAT IN SECTION B WAS PLotted FROM THE FIELD NOTES OF ACTUAL SURVEYS MADE BY ME OR UNDER MY SUPERVISION AND THAT THE SAME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Date Surveyed July 27, 1963

Four States Engineering Co.  
 FARMINGTON, NEW MEXICO

*Edward G. Enoch*  
 REGISTERED ENGINEER OR  
 LAND SURVEYOR

Certificate No. 3602

	■	■	
	■	■	

**(SUBMIT IN TRIPLICATE)**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**Indian Agency** .....

**Abstract**

Allottee                     

Lease No. 200-200-200

## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY
NOTICE OF INTENTION TO ABANDON WELL	<b>Permitting &amp; Drilling</b>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

August 29 1969

Well No. 10 is located 1900 ft. from S line and 640 ft. from W line of sec. 26

**EX-107 Sec. 26**  
**(14 Sec. and Sec. No.)**

**2000**  
**(Twp.)**

174  
-----  
(Range)

**W.M.F.M.**  
(Meridian)

May Boston College  
(Field)

**State of \_\_\_\_\_**  
(County or Subdivision)

**New Mexico**  
(State or Territory)

The elevation of the derrick floor above sea level is 9900 ft.

## DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, casing  
ing points, and all other important proposed work)

Well spudded July 29, 1949. Set 7-5/8" OD casing at 26' and cemented with 5 sacks of  
sand. W.O.C. 24 hrs. Drilled to 177'.

Q988. 1 - 177-1874 (187) - 1874-1875

**Top 3' - Medium grained glauconitic sandstone, slight color, thin shale laminations, scattered stain and partings.**

**Unit 206 - Black shale**

**Foot 12' 6" - Black shale with limestone streaks**

Reached total depth of 1835' on August 1, 1963. Set 4-1/2" CB casing at 1829' and cemented with 100 sacks. W.O.B. 24 hrs. Shut off tested OK. Did not drill out cement plug at 1810'. FLOW 1810'. Perforated 4-1/2" CB casing from 1764-1769' for a total of 5 feet and 20 holes. Treated through 4-1/2" CB casing perfor. 1764-1769' with 44,470 gallons of lease oil and 93,000# 20/40 sand.

After recovering all lost oil well pumped 46 barrels of oil in 24 hours.

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Stolly Oil Company

Address Box 720

## History, New Mexico

SEP 4 1963  
By (ORIGINAL SIGNED) H. E. Ash  
FBI CON. COM  
DIST. 3  
Title Dist. Sept.

Title	Dist.	Supt.
-------	-------	-------

# ILLEGIBLE

RECEIVED	
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SANTA FE	
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U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

REQUEST FOR (OIL) - ~~ALLOWABLE~~ **ALLOWABLE**  
**ILLEGIBLE**

New Well

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico  
(Place)

8-26-63  
(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Shelly Oil Company  
(Company or Operator)

Navajo #1, Well No. 10, in NM  $\frac{1}{4}$  SW  $\frac{1}{4}$ ,  
(Lease)

L, Sec. 26, T. 32N, R. 17W, NMPM, Many Rocks Gallup Pool  
Unit Letter

San Juan

County. Date Spudded 7-29-63 Date Drilling Completed 8-1-63

Please indicate location:

Elevation 9909' KB Total Depth 1835' PBD 1810'

Top Oil/Gas Pay 1764' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1764-1769'

Open Hole — Depth Casing Shoe 1829' Depth Tubing 1751'

OIL WELL TEST -

Natural Prod. Test: — bbls. oil, — bbls water in — hrs, — min. Choke Size —

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 44 bbls. oil, 0 bbls water in 24 hrs, 0 min. Choke Size —

GAS WELL TEST -

Natural Prod. Test: — MCF/Day; Hours flowed — Choke Size —

Method of Testing (pitot, back pressure, etc.): —

Test After Acid or Fracture Treatment: — MCF/Day; Hours flowed —

Choke Size — Method of Testing: —

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated with 45.470 gals. lease oil and 90,000 20-40 sand.

Casing Press. — Tubing Press. — Date first new oil run to tanks August 23, 1963

Oil Transporter El Paso Products Pipeline Company

Gas Transporter —

Remarks: Well pumped 44 bbls. in 24 hours.

I hereby certify that the information given above is true and complete to the best of my knowledge. DIST. 3

Approved AUG 28 1963, 19—

OIL CONSERVATION COMMISSION  
Original Signed By

By: A. R. KENDRICK

Title REGIONAL ENGINEER DIST. NO. 3

**SHelly OIL COMPANY**

(Company or Operator)

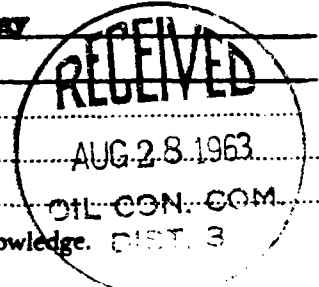
By: J. W. Giorgi  
(Signature)

Title Assistant District Superintendent

Send Communications regarding well to:

Name Shelly Oil Company

Address Box 730, Hobbs, New Mexico



Size	Feet	S&W
7-5/8"	28'	8
4-1/2"	1829'	100
2-3/8"	1751'	—

640' FWL & 1900' FWL  
(FOOTAGE)

Tubing, Casing and Cementing Record

DEVILATION AFFIDAVIT

Date August 26, 1963

New Mexico Oil Conservation Commission

1000 Rio Brava Road

Alamogordo, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

ILLEGIBLE

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of July 1963, Scott Bros. Drilling Co. ran the following surveys for Skelly Oil Company on their Navajo lease, Well No. 10, in NW 1/4 of SW 1/4 of Section 26-32N-17W NMPM, New Rocks Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
500'	1		
1000'	1-1/2		
1500'	1-1/4		

Subscribed and sworn to before me this 26th day of August 19 63

Jesse W. Thompson  
Notary Public in and for said County and State

My Commission expires: 2-16-67

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

J. W. George  
Name

Assistant District Superintendent  
Position

Box 730, Hobbs, New Mexico  
Address



NUMBER OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

*B.T.*

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #7</b>		Well No. <b>20</b>	
Unit Letter <b>L</b>	Section <b>26</b>	Township <b>32N</b>	Range <b>19W</b>	County <b>San Juan County</b>			
Pool <b>Many Leases Group</b>				Kind of Lease (State, Fed, Fee) <b>Federal - 2400</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>L</b>	Section <b>26</b>	Township <b>32N</b>	Range <b>19W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>El Paso Products Pipeline Co.</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 1940 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection**

**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas .... ☐  
 Casing head gas . ☐ Condensate . . ☐

Change in Ownership ..... ☐  
 Other (explain below)

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 26th day of August, 19 63.

**OIL CONSERVATION COMMISSION**

Approved by

Original Signed By  
**A. R. KENDRICK**

Title

**PETROLEUM ENGINEER DIST. NO. 3**

Date

**AUG 28 1963**

By

Title

Company

Address

*J. W. George*  
**Assistant District Superintendent**  
**Shelly Oil Company**  
**Box 730, Hobbs, New Mexico**



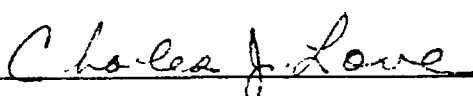
NUMBER OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

BT

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Navajo "up"</b>		Well No. <b>10</b>	
Unit Letter <b>W</b>	Section <b>26</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks			Unit Letter <b>W</b>	Section <b>26</b>	Township <b>32-N</b>	Range <b>17-W</b>	
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent) <b>Box 1588 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> <b>None</b>			Date Connected	Address (give address to which approved copy of this form is to be sent)			
If gas is not being sold, give reasons and also explain its present disposition:  <b>waiting on gas connection - Gas being vented.</b>							
<p align="center"><b>REASON(S) FOR FILING (please check proper box)</b></p> <p>New Well ..... <input type="checkbox"/>      Change in Ownership ..... <input type="checkbox"/></p> <p>Change in Transporter (check one)</p> <p>Oil ..... <input checked="" type="checkbox"/>      Dry Gas ..... <input type="checkbox"/></p> <p>Casing head gas . <input type="checkbox"/>      Condensate .. <input type="checkbox"/></p> <p align="center">Other (explain below)</p>							
<p align="center"><b>TRANSPORTER CHANGED FROM SHELL OIL COMPANY TO SHELL PIPE LINE CORPORATION EFFECTIVE 12/31/69</b></p> <p align="center"><b>RECEIVED</b>  <b>APR 27 1964</b>  <b>OIL CON. COM.</b>  <b>DIST. 3</b></p>							
Remarks  <b>Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.</b>							
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.							
Executed this the <u>24th</u> day of <u>April</u> , 19 <u>64</u> .							
OIL CONSERVATION COMMISSION				By			
Approved by							
Original Signed Emery C. Arnold				Title <b>Dist. Engineer</b>			
Title <b>Supervisor Dist. # 3</b>				Company <b>Skelly Oil Company</b>			
Date <b>APR 27 1964</b>				Address <b>Box 730 - Hobbs, New Mexico</b>			

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**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. 19206003540
2. Name of Operator AAA Development Inc	6. If Indian, Allottee or Tribe Name NAVAJO TRIBAL
3. Address and Telephone No. PO Box 1093 Shiprock NM 87420	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) NO 10 NAVAJO P 1980 FSL + 660 FWL Sec 26 Lease 1420 600-3540 T32MR17W	8. Well Name and No. NO 10 NAVAJO P
	9. API Well No. 3004587061
	10. Field and Pool, or Exploratory Area MANY ROCKS
	11. County or Parish, State SAN JACON

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"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<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.)\*

NO 10 NAVAJO P HAS Gas Engine Need larger  
TANK Pump oil well within 30 days

RECEIVED  
JUN - 3 1997  
OIL CON. DIV.  
DIST. 3

070 JAN 11 AM 11:01  
97 JUN - 2 PM 3:01

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

Signed Julien E. Bowser Title PIA Date 6-1-97

(This space for Federal or State office use)

Approved by /s/ Duane W. Spencer Title \_\_\_\_\_ Date JUN - 4 1997

Conditions of approval, if any: \_\_\_\_\_

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully 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

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

3. Lease Designation and Serial No.

14-20=600 3540

6. If Indian, Allottee or Tribe Name

Navajo Tribal

**SUBMIT IN TRIPLICATE**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

A P A Development Inc Colorado

3. Address and Telephone No.

4067 S.W, 97 Ct, Miami Fla 33165

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

1980 FSL 660 FWL Sec 26 32 N 17 W

8. Well Name and No.

Navajo P

9. API Well No.

10. Field and Pool, or Exploratory Area

Many Rocks;

11. County or Parish, State

San Juan N.M.

**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  
☒ 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.)\*

This Well Navajo P 10 has been operated by an Gas Engine I started to Ready it for Electric when we were beat to the wire we thought we were going to get. I am asking for extension of 6 Months to get this well into Production Sept 1 to March 1v 1998.

This well produce 19,000 Barrels of Oil Primary

RECEIVED  
SEP 17 1997

OIL CON. DIV.  
DIST. 3

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

Signed William W. Spencer Title Pres. A P A Development Inc Date Aug 30 1997

(This space for Federal or State office use)

Approved by William W. Spencer  
Conditions of approval, if any:

Title \_\_\_\_\_ Date SEP 15 1997

This is 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

NMOCD

## PLUGS AND ADAPTERS

Heaving plug—Material \_\_\_\_\_ Length \_\_\_\_\_ Depth set \_\_\_\_\_

Adapters—Material \_\_\_\_\_ Size \_\_\_\_\_

## SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" OS casing perfor. 1764' - 1769' with 46,470 gallons of lease oil and 50,000# 20/40 sand.						

## TOOLS USED

Rotary tools were used from \_\_\_\_\_ feet to 1835' feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

Cable tools were used from \_\_\_\_\_ feet to \_\_\_\_\_ feet, and from \_\_\_\_\_ feet to \_\_\_\_\_ feet

## DATES

\_\_\_\_\_, 19\_\_\_\_ Put to producing August 20, \_\_\_\_\_, 1963

The production for the first 24 hours was 44 barrels of fluid of which 49.9% was oil; \_\_\_\_\_% emulsion; \_\_\_\_\_% water; and .1% sediment. Gravity, °Bé. 41.7

If gas well, cu. ft. per 24 hours \_\_\_\_\_ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_

Rock pressure, lbs. per sq. in. \_\_\_\_\_

## EMPLOYEES

\_\_\_\_\_, Driller  
 Johnston, Driller  
 Odom, Driller

ILLEGIBLE

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	337	337	Sand & Shale
337	1447	1110	Sand & Shale - Top Mancos - 337'
1447	1637	190	Sand & Shale - Top Middle Gallup - 1447'
1637	1763	126	Sand & Shale - Top Lower Gallup - 1637'
1763	1775	12	Sand & Shale - Top Tooto - 1763'
1775	1835	60	Sand & Shale - Top Sanistee - 1775'
	1835		
	1810		
		Total Depth	
		Plug Back Total Depth	

Geological tops picked by Lane Wells Gamma Ray Induction Log

CORE NO. 1 - 1771 - 1791' (20') - Recovered - 12'6"

Top - 3'6" - Medium grained glauconitic sandstone, slight odor, thin shale laminations, scattered stain and partings

Next - 2'6" - Black Shale

Next - 12'6" - Black Shale with limestone streaks

FROM—

TO—

TOTAL FEET

FORMATION

FOVER

FORMATION RECORD

18-48094

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

NO. OF COPIES RECEIVED		5
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SANTA FE		1
FILE		1
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	1
	GAS	
OPERATOR		2
PRORATION OFFICE		

Operator Getty Oil Company	
Address Box 3360, Casper, WY 82602	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 10	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee	Lease No. 14-20-600-3540
Location				
Unit Letter L	1980	Feet From The South	Line and 660	Feet From The West
Line of Section 26	Township 32N	Range 17W	NMPM,	San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Shell PipeLine						
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 26	Twp. 32N	Rge. 17W	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.
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)

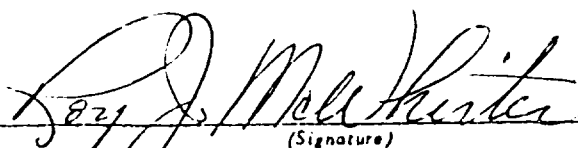
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

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

  
(Signature)

Area Superintendent  
(Title)

3/2/77

(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 1 1977, 19

BY ORIGINAL SIGNATURE OF AREA SUPERINTENDENT, JR.

TITLE PATROLMAN

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	3
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

Lease Name Navajo "p"		Well No. 10	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location					
Unit Letter L	1980	Feet From The South	Line and 660	Feet From The West	
Line of Section 26	Township 32N	Range 17W	, NMPM, San Juan		County

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation		Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, NM 87401			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Pge. 17W	Is gas actually connected? When

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

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		APPROVED <u>SEP 12 1979</u> , 19	
		BY <u>Original Signed by A. R. Kendrick</u>	
		SUPERVISOR DISTRICT # 2	
		TITLE	

James P. Hooley  
(Signature)  
co-operator  
(Title)  
Sept 11, 1979  
(Date)

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED		
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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR OIL COMPANY	
Address Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 10	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 3540
Location Unit Letter <u>L</u> ; <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>26</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Giniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Office Manager

OIL CONSERVATION COMMISSION

APPROVED AUG 25 1982  
BY Original Signed by FRANK T. CHAVEZ  
TITLE SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
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Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply

NO. OF COPIES RECEIVED		
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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I. Operator  
BayStar Petroleum Corporation  
Address  
P. O. Box 2975, Corpus Christi, Texas 78403  
Reason(s) for filing (Check proper box) Other (Please explain)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 10	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location Unit Letter L ; 1980 Feet From The South Line and 660 Feet From The West Line of Section 26 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1887, Bloomfield, NM 87413			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W
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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)

Michael H. North, President  
(Title)

May 2, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE  
(Other instructions on re-  
verse side)

Form approved  
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.)

RECEIVED

1. OIL ☒ WELL GAS ☐ WELL OTHER ☐

2. NAME OF OPERATOR

3. ADDRESS OF OPERATOR

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

14. PERMIT NO.

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

5. LEASE DESIGNATION AND SERIAL NO

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

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

12. COUNTY OR PARISH

13. STATE

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANE

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.) \*

Operations were performed on 7/22/85. Filled backside  
4 1/2" casing and 2 3/8" tubing with 15 barrels of water. Packer  
held at 1733. Mixed 165 gallons of water with 55 gallons of  
Tus flow. Pumped down tubing and followed with 1.5 barrels water  
to fill tubing. Displaced acid into formation with 4 barrels  
of water. Shut-in pressure was 900 psI. Lett shut in over  
night and swabed day the following day and put back on  
production. Production before treatment 2 BOPD to 0 BWPD  
Production after treatment 0 BOPD to 0 BWPD,

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

SIGNED

TITLE

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DATE AUG 16 1985

FARMINGTON RESOURCE AREA

BY

\*See Instructions on Reverse Side

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED  
OCT 17 1988  
OIL CONSERVATION DIVISION

I. Operator  
**A.P.A. Development Corporation**

Address  
**P.O. Box 215, Cortez, Colorado 81321**

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership			

Other (Please explain)

If change of ownership give name and address of previous owner **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "P"</b>	Well No. <b>10</b>	Pool Name, including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Navajo</b> State, Federal or Fee <b>14-20-600-3540</b>	Lease No.
Location Unit Letter <b>L</b> : <b>1980</b> Feet From The <b>South</b> Line and <b>660</b> Feet From The <b>West</b> Line of Section <b>26</b> Township <b>32N</b> Range <b>17W</b> , NMPM. <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Ciniza Pipe Line, Inc.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1887, Bloomfield, NM 87413</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<b>C 34 32N 17W</b>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Yatink B. Wootley*  
(Signature)  
**Operator**  
(Title)  
**10-14-88**  
(Date)

OIL CONSERVATION DIVISION

APPROVED **10-17-1988**  
BY *Samuel J. Chang*  
TITLE **SUPERVISION DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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 A.P.A. Development Inc.		Well API No.
Address P.O. Box 215, Cortez, CO 81321		
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 checked="" 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 Navajo "P"	Well No. 10	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Navajo State, Federal or Fee 14	Lease No. 20-600-3540
Location Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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	Choke Size	
Actual Prod. During Test	Oil - Bbls.	Gas - MCF	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. per Day	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.

Signature  
Patrick B. Woosley  
Printed Name  
Operator  
Title  
8/7/90  
Date  
(303) 565-2458  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 28 1990  
By  
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.

Submit 5 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

I. Operator A.P.A. Development, Inc.		Well API No. 300458706100S1
Address P.O. Box 215, Cortez, CO 81321		
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 checked="" 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 Navajo "P"	Well No. 10	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-600-3540
Location				
Unit Letter L	: 1980	Feet From The South	Line and 660	Feet From The West
Section 26	Township 32N	Range 17W	San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary-Williams Energy Corporation	Address (Give address to which approved copy of this form is to be sent) 370 - 17th St., Ste 5300, Denver, CO 80202-5653					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.D.T.D.		
Elevations (DF, RKB, RF, 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	OIL CC
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	

GAS WELL

Actual Prod. Test - MMCF/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

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.

Signature Patrick Woosley Operator  
Printed Name Patrick Woosley  
Date 12/6/93 Title 303-565-2458  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved DEC 14 1993  
By Bruce D. Smith  
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.



NAVAJO P11  
APA Development.  
D-35-32N-17W.  
~~650N~~ - ~~640W~~ 810N-510W  
45- ~~87060~~ 11208

P11

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 <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. 14-20-600-3540
2. Name of Operator APA Development Corp. % NMOCO	6. If Indian, Allottee or Tribe Name Navajo Tribe
3. Address and Telephone No. 1000 Rio Grande Rd. Aztec NM 87410 334-6178	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 35 - 32N - 17W 810/N - 510/W	8. Well Name and No. 11 Navajo P
	9. API Well No. 30045 11208
	10. Field and Pool, or Exploratory Area
	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 checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<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.)\*

See attached plugging procedure.

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

Signed NMOCO Contractor Plugging Date 8/11/00

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date 8/17/00

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 Instruction on Reverse Side

NMOCO

API NUMBER 30-045-11208

OPERATOR NAME APA DEVELOPMENT CORP

30-045-11208

WELL NUMBER

11

PROPERTY NAME NAVAJO P

SECTION 35 TOWNSHIP 32N

RANGE 17W

FOOTAGE 810 FNL 510 FWL UL "D"

Sur Csg OD NA HOLE	7 5/8	XX			XX
SUR CSG TD	30	XX			XX
SUR CSG WT	17.7	XX			XX
TOP OF CMT	0	XX			XX
ACTUAL		XX			XX
CACULATED	8 SX	XX			XX
PROD CSG OD 6 1/4	4 1/2	XX			XX
PROD CSG TD	1830	XX			XX
PROD CSG WT	9.5	XX			XX
TOP OF CMT	976	XX	XX	XX	XX
ACTUAL	EST	XX		XX	
FORMATION TOP	CACULATED	100SX	XX	XX	
Gallup 1450'	PERF TOP	1783	XX	XX	
Mancos 330'	PERF BOTTOM	1788	XX	XX	
	PACKER		XX	XX	
	TYPE OF PLUG		XX	XX	
	CIBP & CMT		XX	XX	
	CMT		XX	XX	
			XX	XX	

### PROPOSED PLUGGING OPERATION

MIRU PU, BOPE, TOO H W/TUBING, PICK UP WORK STRING, CIRC HOLE

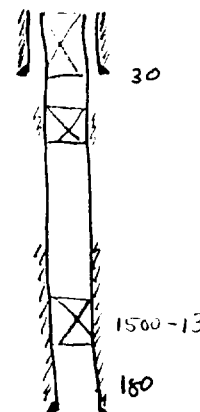
SPOT 14 SX PLUG 1500-1350 WOC TAG, FILL AS REQUIRED

PERF @ 381' PUMP 32 SX, 380-281, 18 SX OUTSIDE CSG & 14 SX INSIDE CSG

PERF @ 80 CIRC CEMENT TO SURFACE, EST 17 SX

CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS

Close pits according to guidelines: Clean and level location





STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL
	GAS
OPERATOR	
PERMITS OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED  
OCT 17 1988  
OIL CONSERVATION DIVISION

I. Operator  
A.P.A. Development Corporation  
Address  
P.O. Box 215, Cortez, Colorado 81321  
Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☒ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Gashead Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 11	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Navajo	Lease No. 14-20-600-3540
Location Unit Letter D : 810 Feet From The North Line and 510 Feet From The West Line of Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887, Bloomfield, NM 87413				
Name of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	Is gas actually connected? When

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Patrick B. Woolley  
(Signature)  
Operator  
(Title)  
10-12-88  
(Date)

OIL CONSERVATION DIVISION  
OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Burt D. Dwyer  
TITLE SUPERVISION DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

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.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>WIW</u>	5. LEASE DESIGNATION AND SERIAL NO. <u>14-20-600-3540</u>
2. NAME OF OPERATOR <u>A.P.A. Development Inc.</u>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME <u>Navajo</u>
3. ADDRESS OF OPERATOR <u>Box 215 Cortez CO. 81321</u>	7. UNIT ASSIGNMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>810' FNL &amp; 510' FWL</u> <u>Sec. 35 T32N R17W</u>	8. FARM OR LEASE NAME <u>Navajo "P"</u>
14. PERMIT NO.	9. WELL NO. <u>11</u>
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	10. FIELD AND POOL, OR WILDCAT <u>Many Rocks GALLUP</u>
	11. SEC., T., R., OR BLK. AND SUBST. OR AREA <u>Sec 35 T32N R17W</u>
	12. COUNTY OR PARISH <u>San Juan</u>
	13. STATE <u>NM</u>

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

NOTICE OF INTENTION TO		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(Other) WIW

(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 pertinent to this work.)

Plan to condition well back to active water  
Injection

RECEIVED  
MAR 27 1992  
OIL CON. DIV.  
DIST. 3

RECEIVED  
BLM  
92 MAR 17 PM 1:55  
019 FARMINGTON, N.M.

THIS APPROVAL EXPIRES APR 01 1993

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

SIGNED

Pat Woolley

TITLE

DATE

3/13/92

(This space for Federal or State Office use)

APPROVED BY

TITLE

DATE

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

MAR 26 1992

AREA MANAGER

\*See Instructions on Reverse Side

NMOOD

## SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" casing ports. 1783'-1788' with 250 gallons HCl Acid & 2000 lb/40 sand. Treated through 4-1/2" casing ports. 1782'-1788' with 49,700 gallons of loose oil and 90,000 lb/40 sand.						

## TOOLS USED

Rotary tools were used from 0 feet to 1835 feet, and from 1835 feet to 1811 feet

Cable tools were used from 0 feet to 1835 feet, and from 1835 feet to 1811 feet

## DATES

The production for the first 24 hours was 63 barrels of fluid of which 99.9% was oil; .1% emulsion; % water; and % sediment. Gravity, °Bé. 41.4

If gas well, cu. ft. per 24 hours \_\_\_\_\_ Gallons gasoline per 1,000 cu. ft. of gas \_\_\_\_\_

Rock pressure, lbs. per sq. in. \_\_\_\_\_

## EMPLOYEES

\_\_\_\_\_, Driller

\_\_\_\_\_, Driller

**ILLEGIBLE**

\_\_\_\_\_, Driller

\_\_\_\_\_, Driller

## FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	330	330	Sand & Shale
330	1450	1120	Sand & Shale - Top Mancos - 330'
1450	1644	194	Sand & Shale - Top Middle Gallup - 1450'
1644	1782	138	Sand & Shale - Top Lower Gallup - 1644'
1782	1792	10	Sand & Shale - Top Tecite - 1782'
1792	1835	43	Sand & Shale - Top Sanastee - 1792'
	1835	Total Depth	
	1811	Plug Back Total Depth	
			Geological Tops picked by Schlumberger Induction Gamma Ray Log
FROM—	TO—	LOFT FEET	FORMATION

CONC NO. 1 - 1770' - 1790' - (20') - RECOVERED - 20'

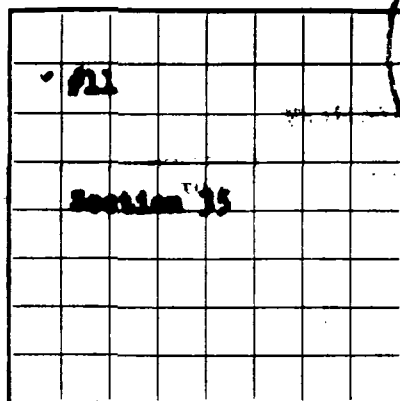
Top - 8' - Black Shale

Next - 4' - Shale with thin sand streaks

Next - 9' - Sandstone, tight gray with shale streaks & horizontal fractures

Next - 3' - Shale with lime streaks

(OVER)  
FORMATION RECORD—CONTINUED



LOCATE WELL CORRECTLY

OCT 14 1963

OIL &amp; GAS RECORD

OCT 14 1963

 U. S. LAND OFFICE Window Rock  
 SERIAL NUMBER 14-38-600-3540-  
 LEASE OR PERMIT TO PROSPECT \_\_\_\_\_

 UNITED STATES  
 DEPARTMENT OF THE INTERIOR  
 GEOLOGICAL SURVEY

## LOG OF OIL OR GAS WELL

 Company Shelly Oil Company Address Box 730 - Hobbs, New Mexico  
 Lessor or Tract Navajo "P" Field Many Rocks Gallup State New Mexico  
 Well No. 11 Sec. 35 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
 Location 510 ft. N of N Line and 510 ft. E of N Line of Sec. 35 Elevation 5919'  
 (Derrik floor relative to sea level)

 The information given herewith is a complete and correct record of the well and all work done thereon  
 so far as can be determined from all available records.

Signed

(ORIGINAL  
SIGNED)H. E. AshDate October 5, 1963Title Dist. Supt.

The summary on this page is for the condition of the well at above date.

Commenced drilling September 1, 1963 Finished drilling September 5, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

 No. 1, from 1785 to 1787' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

 No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
 No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
7-5/8"	26	8	AMCO	100	Plug	1785'	1787'		Isolation of oil or gas zone
4-1/2"	18	8	AMCO	100	Plug	1787'	1789'		Isolation of oil or gas zone
3-1/2"	14	8	AMCO	100	Plug	1789'	1791'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1791'	1793'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1793'	1795'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1795'	1797'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1797'	1799'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1799'	1801'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1801'	1803'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1803'	1805'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1805'	1807'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1807'	1809'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1809'	1811'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1811'	1813'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1813'	1815'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1815'	1817'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1817'	1819'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1819'	1821'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1821'	1823'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1823'	1825'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1825'	1827'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1827'	1829'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1829'	1831'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1831'	1833'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1833'	1835'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1835'	1837'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1837'	1839'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1839'	1841'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1841'	1843'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1843'	1845'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1845'	1847'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1847'	1849'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1849'	1851'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1851'	1853'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1853'	1855'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1855'	1857'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1857'	1859'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1859'	1861'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1861'	1863'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1863'	1865'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1865'	1867'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1867'	1869'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1869'	1871'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1871'	1873'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1873'	1875'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1875'	1877'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1877'	1879'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1879'	1881'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1881'	1883'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1883'	1885'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1885'	1887'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1887'	1889'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1889'	1891'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1891'	1893'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1893'	1895'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1895'	1897'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1897'	1899'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1899'	1901'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1901'	1903'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1903'	1905'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1905'	1907'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1907'	1909'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1909'	1911'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1911'	1913'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1913'	1915'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1915'	1917'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1917'	1919'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1919'	1921'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1921'	1923'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1923'	1925'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1925'	1927'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1927'	1929'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1929'	1931'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1931'	1933'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1933'	1935'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1935'	1937'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1937'	1939'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1939'	1941'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1941'	1943'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1943'	1945'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1945'	1947'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1947'	1949'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1949'	1951'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1951'	1953'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1953'	1955'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1955'	1957'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1957'	1959'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1959'	1961'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1961'	1963'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1963'	1965'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1965'	1967'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1967'	1969'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1969'	1971'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1971'	1973'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1973'	1975'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1975'	1977'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1977'	1979'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1979'	1981'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1981'	1983'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1983'	1985'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1985'	1987'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1987'	1989'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1989'	1991'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1991'	1993'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1993'	1995'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1995'	1997'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1997'	1999'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	1999'	2001'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2001'	2003'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2003'	2005'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2005'	2007'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2007'	2009'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2009'	2011'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2011'	2013'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2013'	2015'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2015'	2017'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2017'	2019'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2019'	2021'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2021'	2023'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2023'	2025'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2025'	2027'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2027'	2029'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2029'	2031'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2031'	2033'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2033'	2035'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2035'	2037'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2037'	2039'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2039'	2041'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2041'	2043'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2043'	2045'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2045'	2047'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2047'	2049'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2049'	2051'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2051'	2053'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2053'	2055'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2055'	2057'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2057'	2059'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2059'	2061'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2061'	2063'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2063'	2065'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2065'	2067'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2067'	2069'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2069'	2071'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2071'	2073'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2073'	2075'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2075'	2077'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2077'	2079'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2079'	2081'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	2081'	2083'		Isolation of oil or gas zone
2-1/2"	10	8	AMCO	100	Plug	20			

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

1420-600-3940

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Mountain Tribal

7. UNIT AGREEMENT NAME

-

8. FARM OR LEASE NAME

Navajo "F"

9. WELL NO.

11

10. FIELD AND POOL, OR WILDCAT

Many Rocks Gallup

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

Sec. 35-32N-17W

1. OIL ☒ WELL GAS ☐ WELL OTHER ☐

2. NAME OF OPERATOR

Shelly Oil Company

3. ADDRESS OF OPERATOR

Box 790 - Hobbs, New Mexico

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

810' PML &amp; 510' PML Sec. 35-32N-17W

14. PERMIT NO.

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

5919' KB

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

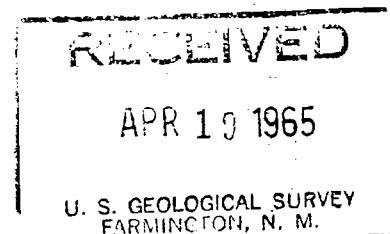
## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐(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.)\*

Moved in and rigged up pulling unit. Pulled rods and tubing. Installed Water  
Injection Equipment and started injecting water into the Gallup Formation through  
4-1/2" OD casing perfs. 1781-1788' on April 12, 1965.

This well is a Water Injection Well for the Many Rocks Gallup Pressure Maintenance  
Project No. 3 Area "A" in the Many Rocks Gallup Oil Pool.

Date work performed - April 8, 1965.



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

SIGNED (ORIGINAL) (SIGNED) H. E. Aab

TITLE Dist. Superintendent

DATE April 15, 1965

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-51424.

## 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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. <b>1420-607-3540</b>	
2. NAME OF OPERATOR <b>Shelly Oil Company</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Mountain Tribal</b>	
3. ADDRESS OF OPERATOR <b>Box 730 - Hobbs, New Mexico</b>		7. UNIT AGREEMENT NAME <b>---</b>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>810' PNL &amp; 510' PNL Sec. 35-32N-17W</b>		8. FARM OR LEASE NAME <b>Navajo #2</b>	
14. PERMIT NO.		9. WELL NO. <b>11</b>	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>9919' KB</b>		10. FIELD AND POOL, OR WILDCAT <b>Many Rocks Gallup</b>	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 35-32N-17W</b>	
		12. COUNTY OR PARISH <b>San Juan</b>	
		13. STATE <b>New Mexico</b>	

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETION ☐ABANDON\* ☐CHANGE PLANS ☐**Convert well to Water Injection**

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

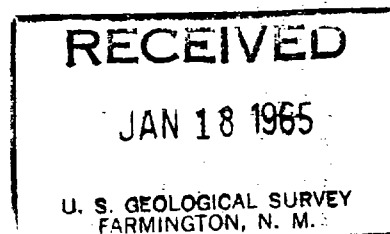
REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

(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 pertinent to this work.)\*

We plan to pull the rods and tubing out of this well. We will then install water injection equipment and inject water through 4-1/2" OD casing perfs. 1781-1788' into the Gallup Formation.

This well will be a Water Injection Well for the Many Rocks Gallup Pressure Maintenance Project No. 3 in the Many Rocks Gallup Oil Pool, San Juan County, New Mexico.



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

SIGNED

(ORIGINAL) **H. E. Aab**

TITLE

**Dist. Superintendent**

DATE

**JAN 18 1965**

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	


NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

FORM C-110  
(Rev. 7-60)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

BT

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Skelly Oil Company</b>		Lease <b>Navajo "P"</b>		Well No. <b>11</b>
Unit Letter <b>np</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>
Pool <b>Many Rocks Gallup</b>			Kind of Lease (State, Fed, Fee) <b>Federal</b>	
If well produces oil or condensate give location of tanks		Unit Letter <b>nc</b>	Section <b>34</b>	Township <b>32-N</b>
				Range <b>17-W</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>		Address (give address to which approved copy of this form is to be sent)		
<b>Shell Oil Company</b>		<b>Box 1588 - Farmington, New Mexico</b>		
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)	
<b>None</b>				
If gas is not being sold, give reasons and also explain its present disposition:				
<b>Waiting on gas connection - Gas being vented.</b>				
REASON(S) FOR FILING (please check proper box)				
New Well <input type="checkbox"/>		Change in Ownership <input type="checkbox"/>		
Change in Transporter (check one)		Other (explain below)		
Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>				
Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/>				
<div style="text-align: right;">  </div>				
Remarks <b>Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.</b>				
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.				
Executed this the <b>24th</b> day of <b>April</b> , 19 <b>64</b>				
OIL CONSERVATION COMMISSION		By <b>Charles J. Love</b>		
Approved by <b>Original Signed Emery C. Arnold</b>		Title <b>Dist. Engineer</b>		
Title <b>Supervisor Dist. # 3</b>		Company <b>Skelly Oil Company</b>		
Date <b>APR 27 1964</b>		Address <b>Box 730 - Hobbs, New Mexico</b>		

NO. 1 OF COP. 3 RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

REQUEST FOR (OIL) - ~~ALLOWABLE~~  
**ILLEGIBLE**

New Well  
Resubmission

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico

September 30, 1963

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company Navajo NPM, Well No. 11, in NW  $\frac{1}{4}$  NW  $\frac{1}{4}$ ,  
(Company or Operator) (Lease)  
D, Sec. 35, T. 32N, R. 17W, NMPM, Many Rocks Gallup Pool  
Unit Letter

San Juan County. Date Spudded 9-1-63 Date Drilling Completed 9-4-63  
Elevation 5919' KB Total Depth 1835' PBDT 1811'

Please indicate location:

D	C	B	A
Well No. 11			
E	F	G	H
Section 35			
L	K	J	I
M	N	O	P

Top Oil/Gas Pay 1781' Name of Prod. Form. Gallup

PRODUCING INTERVAL -

Perforations 1781-1788'

Open Hole --- Depth 1830' Casing Shoe 1760' Depth 1760' Tubing

OIL WELL TEST -

Natural Prod. Test: --- bbls. oil, --- bbls water in --- hrs, --- min. Choke Size ---

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 63 bbls. oil, 0 bbls water in 24 hrs, 0 min. Choke Size ---

GAS WELL TEST -

Natural Prod. Test: --- MCF/Day; Hours flowed --- Choke Size ---

Method of Testing (pitot, back pressure, etc.): ---

Test After Acid or Fracture Treatment: --- MCF/Day; Hours flowed ---

Choke Size --- Method of Testing: ---

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated with 49.780 gals. 1cc oil and 10.000 lb. 40 sand.

Casing Press. --- Tubing Press. --- Date first new oil run to tanks September 27, 1963

Oil Transporter El Paso Products Pipeline Company

Gas Transporter ---

Remarks: Well pumped 63 barrels in 24 hours

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved OCT 2 1963, 1963

OIL CONSERVATION COMMISSION

By: Original Signed Emery C. Arnold

Title Supervisor Dist. # 3

SKELLY OIL COMPANY

(Company or Operator)

By: J. W. George

(Signature)

Title Assistant District Superintendent

Send Communications regarding well to:

Name Skelly Oil Company

Address Box 730, Hobbs, New Mexico

RECEIVED

OCT 2 1963

COM.

DEVIATION AFFIDAVIT

Date September 30, 1963

New Mexico Oil Conservation Commission

1000 Rio Brasas Road

Astec, New Mexico

STATE OF New Mexico

COUNTY OF San Juan

ILLEGIBLE

J. W. George of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Assistant District Superintendent and is fully acquainted with the facts as set forth herein.

That during the months of Sept. 19 63, Scott Bros. Drilling Co. ran the following surveys for Skelly Oil Company on the Navajo "P" Lease lease, Well No. 11, in NW 1/4 of NW 1/4 of Section 35-32N-17W NMPN, Many Rocks Gallup Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
500'	1/2		
1000'	1		
1500'	1		

Subscribed and sworn to before me this 30th day of September 19 63

Esse W. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

Name J. W. George

Assistant District Superintendent  
Position

Box 730 - Hobbs, New Mexico  
Address





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 870 FARMINGTON, NM

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other Injection Well

2. Name of Operator  
A.P.A. Development, Inc.

3. Address and Telephone No.  
P.O. Box 215 Cortez, CO. 81321 (303) 565-2458

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

810' FNL 570' FWL ~~Sec~~ 35, T32N R17W

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

Navajo P

8. Well Name and No.

11

9. API Well No.

30045112080051

10. Field and Pool, or Exploratory Area

Many Rocks

11. Country or Parish, State

San Juan N.M.

12. CHECK APPROPRIATE BOX(ES) 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

☐ 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 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.)

Plan to Plug Well as follows:

1. equalize cement plug from 1811 - 1731'
2. Pick up to 1730 circulate inhibited fresh water to 50' from surface
3. Circulate cement 50' to surface
4. Circulate cement 50' to surface between 4 1/2" and 7 5/8" casings
5. Weld on dry hole marker and remediate location.

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

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

Signed Peter Wozley

Title

Date 10/14/94

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date

APPROVED

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

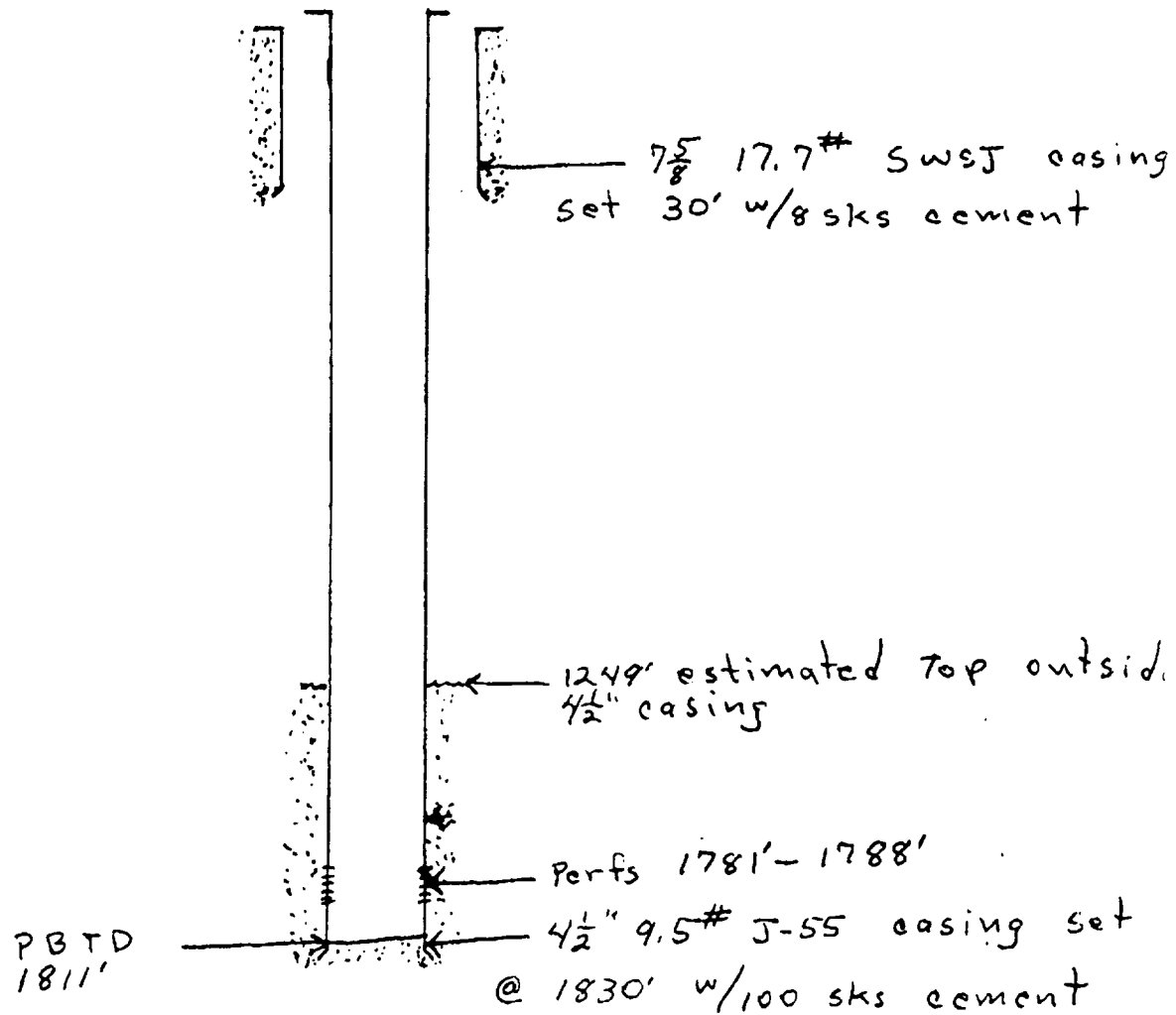
\*See Instruction on Reverse Side

NM000

Navajo P-11

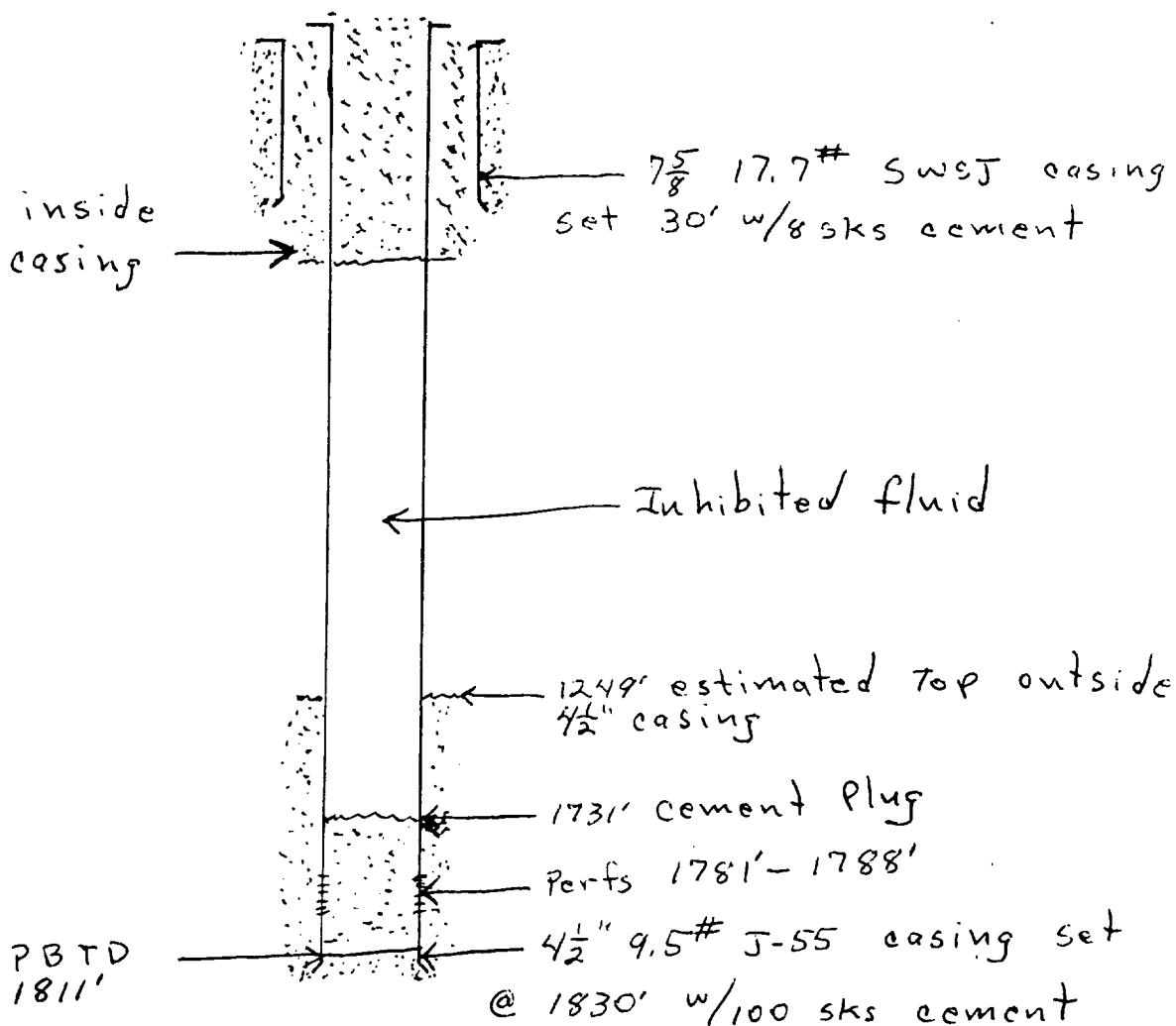
Lease # 14-20-600-3540

existing condition



# Purposed

50' cement plug inside and outside  $4\frac{1}{2}$ " casing



**UNITED STATES DEPARTMENT OF THE INTERIOR**

**BUREAU OF LAND MANAGEMENT  
FARMINGTON DISTRICT OFFICE**

1235 La Plata Highway  
Farmington, New Mexico 87401

Attachment to Notice of

Re: Permanent Abandonment

Intention to Abandon

Well: 11 Navajo P

**CONDITIONS OF APPROVAL**

1. Plugging operations authorized are subject to the attached "General Requirements for Permanent Abandonment of Wells on Federal and Indian Leases."

2. **Mike Flaniken** with the Farmington Office is to be notified at least 24 hours before the plugging operations commence (505) 599-8907.

3. The following modifications to your plugging program are to be made (when applicable):

1. **Tag top of cement plug @ 1731'.**

2. Spot a cement plug from 1500' to 1400' inside the casing plus 50 linear feet excess. (top of Gallup @ 1450')

3. Perforate @ 381' and place a cement plug from 381' to 281' inside and outside the casing, plus 100% excess cement in the annulus and 50 linear feet excess in the casing. ( Bottom of Point Lookout @ 331')

4. Extend surface plug from 80' to the surface on the inside and outside of the casing. (surface casing @ 30')

**Note:** The above modifications are minimum standards. It is acceptable to pump additional cement and combine plugs.

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 WIW

2. Name of Operator

A.P.A. Development, Inc.

3. Address and Telephone No

P.O. Box 215, Cortez, CO 81321 303-565-2458

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

810' FNL & 510' FNL, Sec. 35, T32N R17W

5. Lease Designation and Serial No

14-20-600-3540

6. If Indian, Allottee or Tribe Name

NAVAJO

7. If Unit or CA, Agreement Designation

8. Well Name and No.

NAVAJO P #11

9. API Well No.

30045112080051

10. Field and Pool, or Exploratory Area

Many Rocks

11. County or Parish, State

SAN JUAN, NM

12. CHECK APPROPRIATE BOX(es) 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

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

**RECEIVED**

APR 9 1993

**OIL CON. DIV**

**DIST. 3**

(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.)\*

Plan to T.A. until can be conditioned  
back to water injection.

RECEIVED  
BLM  
93 MAR 30 AM 11:37  
070 TARRANT, NM

THIS APPROVAL EXPIRES APR 01 1994

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

Signed Pat Woolley

Title

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

**APPROVED  
AS AMENDED**

APR 06 1993

**DISTRICT MANAGER**

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

244000

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA  
1235 LA PLATA HIGHWAY  
FARMINGTON, NEW MEXICO 87401

CONDITIONS OF APPROVAL:

This Temporary Abandonment approval is contingent upon conducting a casing integrity test by JUL 01 1993. Mark Kelly with the Farmington Office is to be notified at least 48 hours prior to conducting the casing integrity test (505-599-8907). If the casing test fails, you will be required to submit your plans to repair the casing or plug and abandon the well.

Office Hours: 7:45 a.m. to 4:30 p.m.



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DIVISION  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

April 13, 1993

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells

Navajo AA #4, E-17-32N-17W	Navajo AA #13, B-20-32N-17W
Navajo #11, E-27-32N-17W	Navajo #10, J-27-32N-17W
Navajo #6, K-27-32N-17W	Navajo #3, O-27-32N-17W
Navajo #12, I-28-32N-17W	Navajo M #2, K-33-32N-17W
Navajo M #7, B-34-32N-17W	Navajo P #11, D-35-32N-17W
Navajo P #9, F-35-32N-17W	Navajo P #7, J-35-32N-17W
Navajo P #6, P-35-32N-17W	

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated. You are required to file for a permit to inject under Rule 701 prior to any injection.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by June 1, 1993 and work completed by June 1, 1994.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File  
David Catanach-UIC Director  
Well File  
David Holguin-EPA



STATE OF NEW MEXICO  
ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

*The More You  
DRUG FILE  
It's All the More  
You'll*

BRUCE KING  
GOVERNOR

ANITA LOCKWOOD  
CABINET SECRETARY

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

December 4, 1992

Mr. Pat Woosley  
A.P.A. Development, Inc.  
PO Box 215  
Cortez, CO 81321

RE: Temporarily Abandoned Injection Wells

Navajo AA #4, E-17-32N-17W  
Navajo AA #13, B-20-32N-17W  
Navajo #11, E-27-32N-17W  
Navajo #6, K-27-32N-17W  
Navajo #3, O-27-32N-17W  
Navajo #12, I-28-32N-17W  
Navajo P #6, J-35-32N-17W

Navajo M #2, K-33-32N-17W  
Navajo M #7, B-34-32N-17W  
Navajo #10, J-27-32N-17W  
~~Navajo P #11, D-35-32N-17W~~  
Navajo P #9, F-35-32N-17W  
Navajo P #7, J-35-32N-17W

Dear Mr. Woosley:

Our records indicate that there has been a continuous six-month period of non-injection into these injection wells. Pursuant to Rule 705-C-1, your authorization to inject has terminated.

Also, the above wells are inactive and require P&A or TA approval under Rules 201, 202 and 203. Please add these wells to the previous list dated December 27, 1991. Plans to bring these wells into compliance are to be submitted by April 1, 1992 and work completed by December 31, 1993.

If you have any questions please feel free to contact this office.

Sincerely,

*Dianna K. Fairhurst*

Dianna K. Fairhurst  
Deputy Oil & Gas Inspector

DKF/sh

XC: TA File  
UIC File  
David Catanach-UIC Director  
~~Well File~~  
George Robin-EPA



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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. 1420-600 3540
2. Name of Operator A A Development Co	6. If Indian, Allottee or Tribe Name NAUAKO Tribal
3. Address and Telephone No. Post 1093 Sheppard Hwy 87420	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) No 11 NAUAKO P 810 FNL & 510 FWL Sec 35 Range 1420 600 3540 T32N, R17W	8. Well Name and No. NAUAKO P 11
	9. API Well No. 30045 11208
	10. Field and Pool, or Exploratory Area Many Reservoirs
	11. County or Parish, State San Juan New Mexico

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"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input checked="" type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<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.)\*

No 11 NAUAKO P is Northmost injection well  
will be Repressuring this lease with  
miscible flood & direct gas.

OIL CON. DIV.  
DIST. 3

14. I hereby certify that the foregoing is true and correct  
Signed William C. Foster Title Pres Date 6-1-97

(This space for Federal or State office use)

Approved by /s/ Duane W. Spencer Title \_\_\_\_\_ Date JUN - 4 1997  
Conditions of approval, if any:

(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_

Navajo Co. \_\_\_\_\_

Allottee Mountain Tribal \_\_\_\_\_

Lease No. 24-22-400-2540

• 721		
Sec. 35		

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL _____	SUBSEQUENT REPORT OF WATER SHUT-OFF _____
NOTICE OF INTENTION TO CHANGE PLANS _____	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING _____
NOTICE OF INTENTION TO TEST WATER SHUT-OFF _____	SUBSEQUENT REPORT OF ALTERING CASING _____
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL _____	SUBSEQUENT REPORT OF REDRILLING OR REPAIR _____
NOTICE OF INTENTION TO SHOOT OR ACIDIZE _____	SUBSEQUENT REPORT OF ABANDONMENT _____
NOTICE OF INTENTION TO PULL OR ALTER CASING _____	SUPPLEMENTARY WELL HISTORY _____
NOTICE OF INTENTION TO ABANDON WELL _____	Perforating & Treating _____

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Hobbs, New Mexico October 5, 1963

Navajo Co.  
Well No. 11 is located 820 ft. from [N] line and 510 ft. from [W] line of sec. 35

14 Sec. 35  
(1/4 Sec. and Sec. No.)

32E  
(Twp.)

17W  
(Range)

N.M.P.M.  
(Meridian)

Many Rocks Gallup  
(Field)

San Juan  
(County or Subdivision)

New Mexico  
(State or Territory)

The elevation of the derrick floor above sea level is 5920 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudlogging jobs, cementing points, and all other important proposed work)

Well spudded September 1, 1963. Set 7-5/8" OD casing at 30' and cemented with 8 sacks by hand. W.O.C. 24 hours. Drilled to 1770'.

Core No. 1 - 1770' - 1780' - Recovered 20'

Top - 8' - Black shale

Next - 4' - Shale with thin sand streaks

Next - 5' - Sandstone, light gray with shale streaks & horizontal fractures

Next - 3' - Shale with lime streaks

Reached total depth of 1835' on September 5, 1963. Set 4-1/2" OD casing at 1830' and cemented with 100 sacks. W.O.C. 48 hours. Shut off tested OK. Did not drill out cement plug at 1811'. P.B.T.D. 1811'. Perforated 4-1/2" OD casing from 1783' to 1788' for a total of 5' and 20 holes. Treated through 4-1/2" OD casing perfor. 1783' - 1788' with 250 gallons 15% HCl Acid and 200 pounds 20/40 sand.

(SEE REVERSE SIDE)

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 730

Hobbs, New Mexico

By (ORIGINAL SIGNED) H. E. Aab

Title Dist. Supt.

(SUBMIT IN TRIPLICATE)


UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_  
Allottee Navajo Tribe  
Lease No. 11-22-62-354

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	<div style="text-align: right;"> <b>RECEIVED</b>  <b>AUG 5 1963</b>  <b>U. S. GEOLOGICAL SURVEY</b>  <b>FARMINGTON, NEW MEXICO</b> </div>
NOTICE OF INTENTION TO CHANGE PLANS		SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF		SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL		SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE		SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING		SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL			

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Well No. 11 is located 420 ft. from N line and 520 ft. from E line of sec. 11  
11/4 Sec. 25 22N 17W 100W  
 (1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Many Rocks Gallup San Juan New Mexico  
 (Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5929 ft.

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

It is our intention to drill Well No. 11 to around 1725' to test Gallup formation.

Our casing program is as follows:

- 20' - 7-5/8" OD 17.75 Spiral Weld Casing - to be cemented with 10 sacks regular cement.
- 1725' - 4-1/2" OD 9.50 J-55 Casing - to be cemented with 75 sacks regular cement w/65 gal and 250 gal cement and 25 sacks regular w/25 calcium chloride.

ILLEGIBLE

I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company SKELLY OIL COMPANY

Address Box 730

Robbs, New Mexico

By J. W. George  
 Title Assistant District Superintendent

NEW MEXICO OIL CONSERVATION COMMISSION  
Well Location and Acreage Dedication Plat

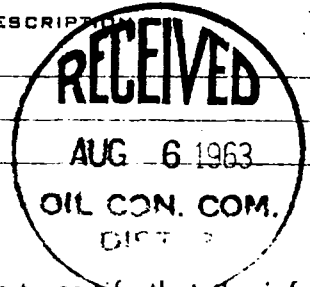
SECTION A.

Date August 5, 1963  
Operator Skelly Oil Company Lease Nava Jo #1  
Well No. 11 Unit Letter D Section 35 Township 32 North Range 17 West NMPM  
Located 810 Feet From North Line, 510 Feet From West Line  
County San Juan G. L. Elevation 5913 Dedicated Acreage 40 Acres  
Name of Producing Formation Gallup Pool Many Rocks Gallup

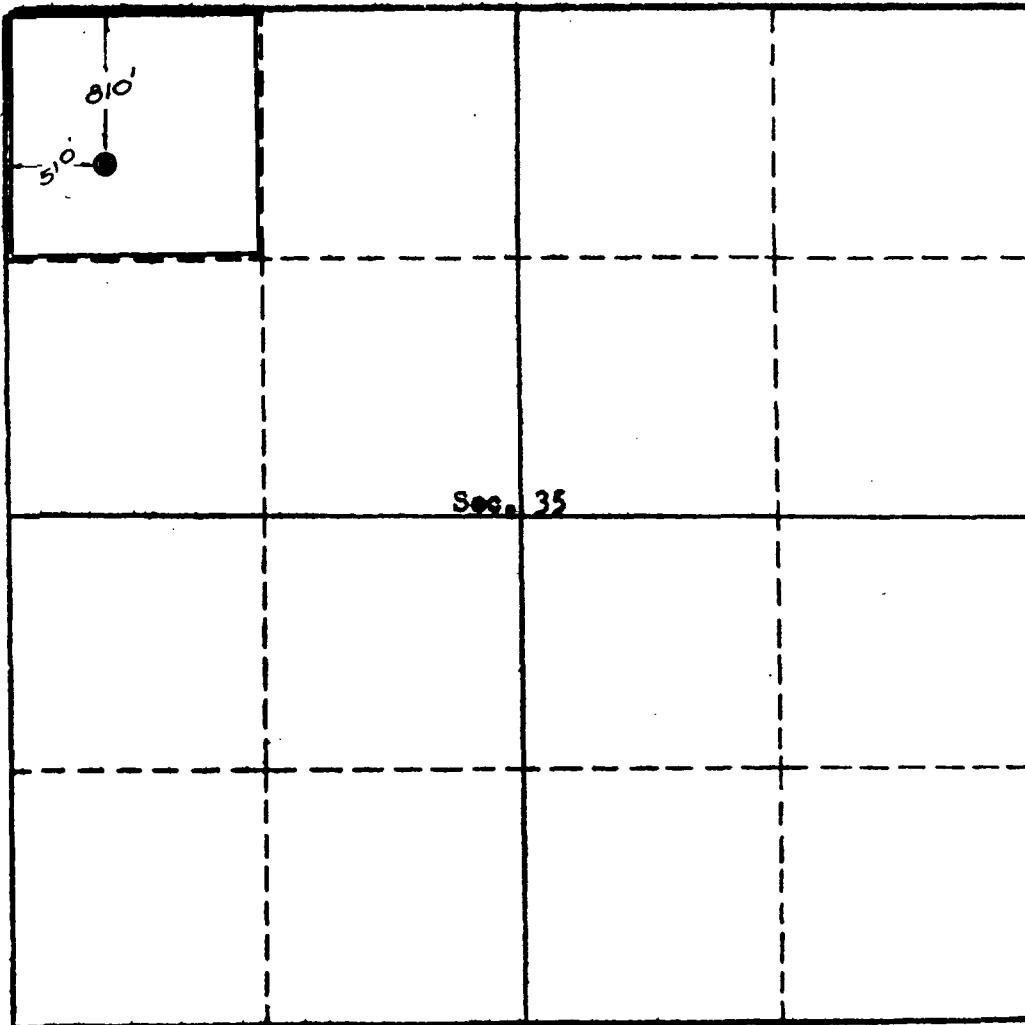
1. Is the Operator the only owner\* in the dedicated acreage outlined on the plat below? Yes X No \_\_\_\_\_
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communitization agreement or otherwise? Yes \_\_\_\_\_ No \_\_\_\_\_ If answer is "Yes," Type of Consolidation \_\_\_\_\_
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION



SECTION B.



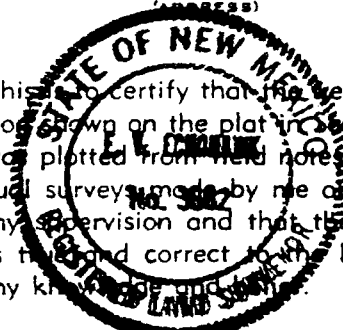
This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY

(OPERATOR)

*J. W. George*  
REPRESENTATIVE  
Box 730, Hobbs, New Mexico  
(ADDRESS)

This is to certify that the well location shown on the plat in Section B 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.

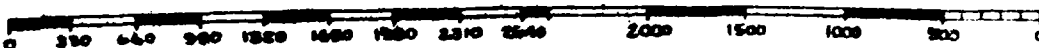


Date Surveyed August 3, 1963

Four States Engineering Co.  
FARMINGTON, NEW MEXICO

*Emmet A. Chamberlain*  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602



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NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO

# CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

FORM C-110  
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Navajo #70</b>		Well No. <b>11</b>	
Unit Letter <b>D</b>	Section <b>36</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Mary Becks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>6</b>	Section <b>36</b>	Township <b>32N</b>	Range <b>17W</b>		
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) <b>Box 1540 - Farmington, New Mexico</b>			
<b>El Paso Products Pipeline Company</b>				<b>Box 1540 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection**

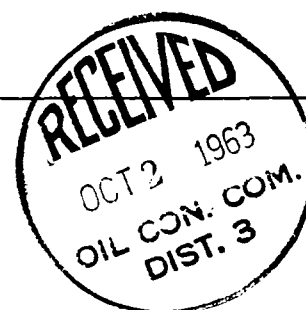
**ILLEGIBLE**

REASON(S) FOR FILING (please check proper box)

New Well ..... ☒  
Change in Transporter (check one)  
Oil ..... ☐ Dry Gas .... ☐  
Casing head gas . ☐ Condensate . . ☐

Change in Ownership ..... ☐  
Other (explain below)

Remarks



The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 30th day of September, 19 63.

OIL CONSERVATION COMMISSION		By
Approved by	Original Signed By <b>A. R. KENDRICK</b>	<b>J. W. George</b>
Title	PETROLEUM ENGINEER DIST. NO. 3	Assistant District Superintendent
Date	OCT 2 1963	Shelly Oil Company
		Address <b>Box 730, Hobbs, New Mexico</b>

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

Operator  
Getty Oil Company

Address  
Box 3360, Casper, Wyoming 82602

Reason(s) for filing (Check proper box)

New Well ☐ Change In Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change In Ownership ☒ Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 11	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal State, Federal or Fee 14-200-600	Lease No. 3540
Location Unit Letter D ; 810 Feet From The North Line and 510 Feet From The West Line of Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corp.	Address (Give address to which approved copy of this form is to be sent) Box 1588, Farmington, NM					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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'tv.	Diff. Res'tv.
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)

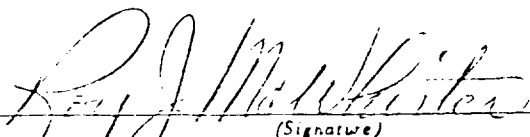
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Oil - MCF

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

VI. CERTIFICATE OF COMPLIANCE

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

  
(Signature)

Area Superintendent

2/4/77

(Date)

OIL CONSERVATION COMMISSION

APPROVED 2/4/77, 19

ORIGINAL SIGNED BY N. E. MAXWELL, JR.

BY

TITLE PETROLEUM

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NO. OF COPIES RECEIVED	6
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez. Colorado 81321	
Reason(s) for filing (Check proper box)	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 Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner  
Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 11	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location Unit Letter D ; 810 Feet From The North Line and 510 Feet From The West Line of Section 35 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <del>Shell Pipeline Corporation</del>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Throssley  
(Signature)  
co. operator  
(Title)  
9-11-1979  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED SEP 12 1979  
Original Signed by A. R. Kendrick  
BY \_\_\_\_\_  
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-119  
Effective 1-1-65

Operator BayStar Petroleum Corporation		
Address P. O. Box 2975, Corpus Christi, Texas 78403		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:	Injection Well
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner WTR Oil Company, Drawer LL, Cortez, Colorado 81321

I. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 11	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location				
Unit Letter D : 810 Feet From The North Line and 510 Feet From The West				
Line of Section 35 Township 32N Range 17W , NMPLM, San Juan County				

II. 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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Pge.
	Is gas actually connected?	When

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

III. 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				

IV. 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 Tanks	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

OIL CON. DIV.  
DIST. 3

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

V. CERTIFICATE OF COMPLIANCE

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

Michael H. North  
(Signature)

Michael H. North, President  
(Title)

May 14, 1985  
(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



APPLICATION OF SKELLY OIL COMPANY  
TO EXPAND ITS MANY ROCKS-GALLUP  
PRESSURE MAINTENANCE PROJECT NO. 3  
IN THE MANY ROCKS-GALLUP OIL POOL  
IN SAN JUAN COUNTY, NEW MEXICO.

ADMINISTRATIVE ORDER  
PMX-13

ADMINISTRATIVE ORDER  
OF THE OIL CONSERVATION COMMISSION

Under the provisions of Order No. R-2664, Skelly Oil Company has made application to the Commission on November 9, 1964, for permission to expand its Many Rocks-Gallup Pressure Maintenance Project No. 3 in the Many Rocks-Gallup Oil Pool, San Juan County, New Mexico.

NOW, on this 30th day of December, 1964, the Secretary-Director finds:

1. That application has been filed in due form.
2. That satisfactory information has been provided that all offset operators have been duly notified of the application.
3. That objection lodged by the State Engineer has been withdrawn.
4. That the proposed injection wells are eligible for conversion to water injection under the terms of Order No. R-2664.
5. That the proposed expansion of the above-referenced pressure maintenance project will not cause waste nor impair correlative rights.
6. That the application should be approved.

IT IS THEREFORE ORDERED:

That the applicant, Skelly Oil Company, be and the same is hereby authorized to inject water into the Gallup formation through the following described wells for purposes of Pressure Maintenance, to wit:

Navajo "M" Well No. 8 located in the SE/4 NE/4 of Section 34,  
Navajo "M" Well No. 12 located in the NE/4 NW/4 of Section 34,  
Navajo "P" Well No. 7 located in the NW/4 SE/4 of Section 35,  
Navajo "P" Well No. 9 located in the SE/4 NW/4 of Section 35,  
and Navajo "P" Well No. 11 located in the NW/4 NW/4 of Section 35, all in Township 32 North, Range 17 West, NMPM,

DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.

STATE OF NEW MEXICO  
OIL CONSERVATION COMMISSION

*A. L. Porter, Jr.*  
A. L. PORTER, Jr.,  
Secretary-Director

RECEIVED  
APR 27 1992

OIL CON. DIV  
DIST. 3

SEAL



APA Development  
NAVAJO P#12  
45-11156  
I-35-32N-17W  
1980S 810E  
1830S

7. 20. 2000

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 *APA Development Corp.*

*% NMOCO*

3. Address and Telephone No.

*1000 Rio Brazos Rd. Aztec NM 87410 334-6178*

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

*35-32N-17W*

5. Lease Designation and Serial No.

*14-20-600-3540*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*12 Navajo P*

9. API Well No.

*30045 11156*

10. Field and Pool, or Exploratory Area

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

☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOCO CONTRACT PLUGGING*

Date *8/11/00*

(This space for Federal or State office use)

Approved by

Title

Date

*8/17/00*

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 Instruction on Reverse Side

NMCOH

API NUMBER 30-045-11156  
 OPERATOR NAME APA DEVELOPMENT CORP WELL NUMBER  
 PROPERTY NAME NAVAJO P  
 SECTION 35 TOWNSHIP 32N RANGE 17W

12

FOOTAGE 1830 FSL 810 FEL UL "I"

Sur Csg OD	NA HOLE	7 5/8	XX		XX
SUR CSG TD		30	XX		XX
SUR CSG WT		32	XX		XX
TOP OF CMT		0	XX		XX
ACTUAL			XX		XX
CACULATED		8 SX	XX		XX
PROD CSG OD	6 1/4	4 1/2	XX		XX
PROD CSG TD		1374	XX	XX	XX
PROD CSG WT		9.5	XX	XX	XX
TOP OF CMT		519	XX	XX	XX
FORMATION TOP	ACTUAL	EST	XX		XX
GALLUP 984 934	CACULATED	100SX	XX		XX
	PERF TOP	1329	XX		XX
	PERF BOTTOM	1335	XX		XX
	PACKER		XX		XX
	TYPE OF PLUG		XX		XX
	CIBP & CMT		XX		XX
	CMT		XX		XX

### PROPOSED PLUGGING OPERATION

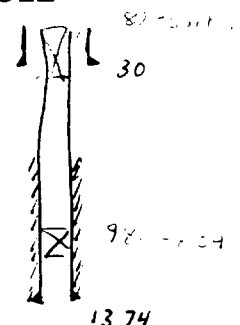
MIRU PU, BOPE, TOOH W/RODS & TUBING, PICK UP WORKSTRING, CIRC HOLE

SPOT 14 SX PLUG 1034-884 WOC TAG, FILL AS REQUIRED

PERF @ 80' CIRC CEMENT TO SURFACE, EST 17 SX

CUT OFF WELLHEAD, INSTALL P&A MARKER, DIG AND CUT ANCHORS

Close pits according to guidelines: Clean and level location



**(SUBMIT IN TRIPLICATE)**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**Indian Agency .....**

**Results - No**

**Alotted Mountain Tribe**

Lease No. **14-024020**

Well #12

## SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	<input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF WATER SHUT-OFF	
NOTICE OF INTENTION TO CHANGE PLANS	<input type="checkbox"/>	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	<input type="checkbox"/>	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	<input type="checkbox"/>	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	<input type="checkbox"/>	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	<input type="checkbox"/>	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	<input type="checkbox"/>		

U. S. GEOLOGICAL SURVEY  
 FARMINGTON, NEW MEXICO

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

**September 10, 1943**

Well No. 12 is located 2430 ft. from N line and 610 ft. from E line of sec. 22

SW/4 Sec. 22 24N 17W 107N  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)

Mary Becks Collins San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5432' ft. (est. EB)

## DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudding jobs, cementing points, and all other important proposed work)

**It is our intention to drill Well No. 12 to around 1400' to test Gailus formation.**

**Our casting program is as follows:**

20' - 7-5/8" 17.75 Spiral Weld Casing - to be cemented with 10 sacks regular cement.

1400' - 4-1/2" 9.50 J-55 Casing - to be cemented with 75 sacks regular cement w/64 gal and 25% gilsonite and 25 sacks regular w/2% calcium chloride.

ILLEGIBLE

**I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.**

Company SHELLY OIL COMPANY

Address **Box 730**

**Hobbs, New Haven**

By J. H. George  
 Title Assistant District Superintendent

# NEW MEXICO OIL CONSERVATION COMMISSION

## Well Location and Acreage Dedication Plat

SECTION A

Date September 10, 1963

Operator Skelly Oil Company Lease May 10 1957  
Well No. 22 Unit 1 Section 35 Township 32 North Range 27 West NMPM  
Located 1830' East From South Line 810' Feet From East Line  
County San Juan G. L. Elevation 5405 Dedicated Acreage 40 Acres  
Name of Producing Formation Gallup Pool Many Rocks Gallup

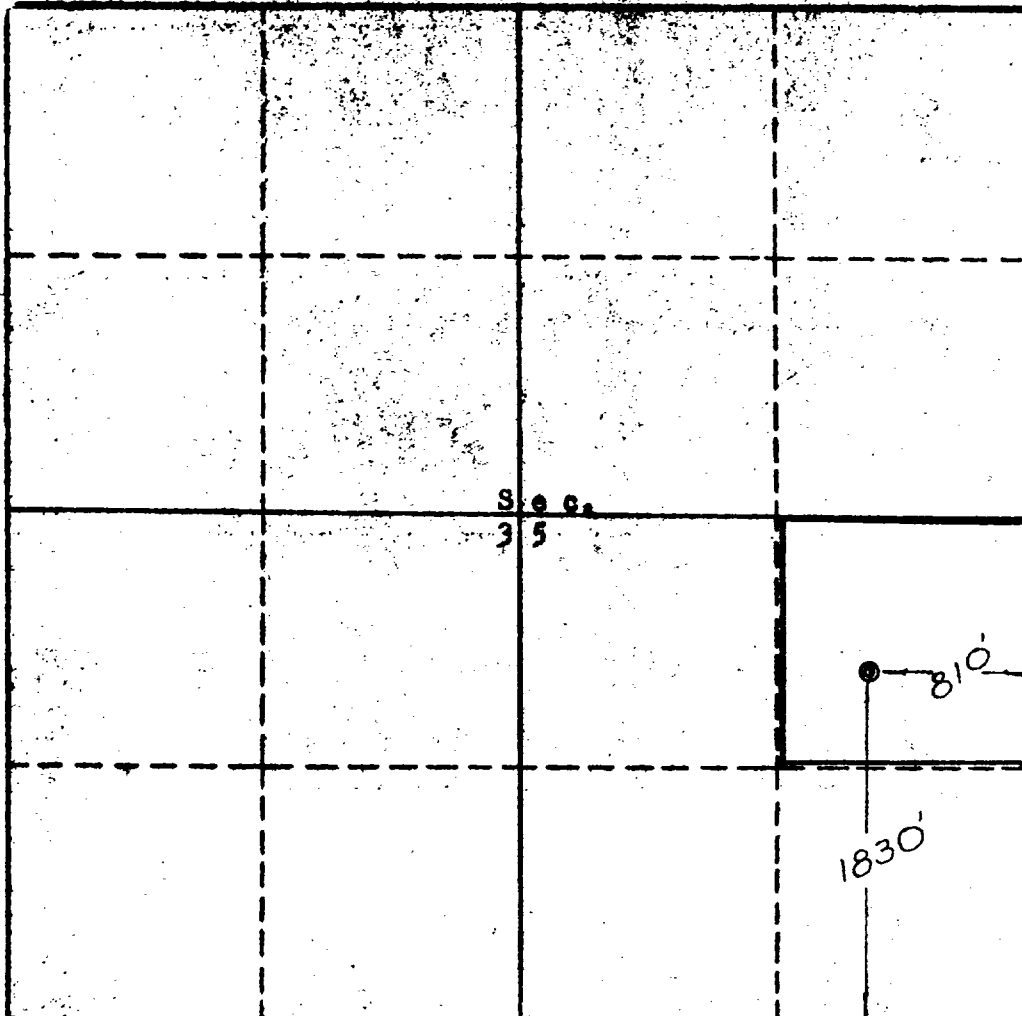
1. Is the Operator the only owner in the dedicated acreage outlined on the plat below? Yes X No
2. If the answer to question One is "No," have the interests of all the owners been consolidated by communization agreement or otherwise? Yes No If answer is "Yes," Type of Consolidation
3. If the answer to question Two is "No," list all the owners and their respective interests below:

OWNER

LAND DESCRIPTION

ILLEGIBLE

SECTION B



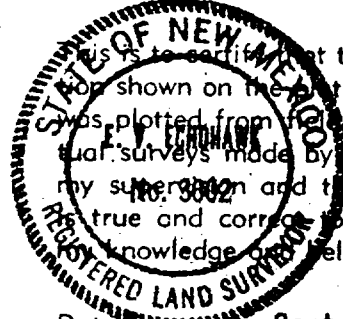
This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

SKELLY OIL COMPANY

(OPERATOR)

*J. W. George*  
(REPRESENTATIVE)

Box 730, Hobbs, New Mexico  
(ADDRESS)

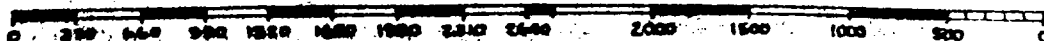


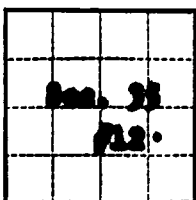
Date Sept. 10, 1963

Four States Engineering Co.  
FARMINGTON, NEW MEXICO

*Conrad H. Edwards*  
REGISTERED ENGINEER OR  
LAND SURVEYOR

Certificate No. 3602





(SUBMIT IN TRIPLICATE)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

Indian Agency \_\_\_\_\_  
Navajo - Hb  
Allottee Mountain Tribal  
Lease No. 14-00-000-350

SUNDRY NOTICES AND REPORTS ON WELLS

NOTICE OF INTENTION TO DRILL	SUBSEQUENT REPORT OF WATER SHUT-OFF	<input checked="" type="checkbox"/>
NOTICE OF INTENTION TO CHANGE PLANS	SUBSEQUENT REPORT OF SHOOTING OR ACIDIZING	
NOTICE OF INTENTION TO TEST WATER SHUT-OFF	SUBSEQUENT REPORT OF ALTERING CASING	
NOTICE OF INTENTION TO REDRILL OR REPAIR WELL	SUBSEQUENT REPORT OF REDRILLING OR REPAIR	
NOTICE OF INTENTION TO SHOOT OR ACIDIZE	SUBSEQUENT REPORT OF ABANDONMENT	
NOTICE OF INTENTION TO PULL OR ALTER CASING	SUPPLEMENTARY WELL HISTORY	
NOTICE OF INTENTION TO ABANDON WELL	Perforating & Treating	<input checked="" type="checkbox"/>

(INDICATE ABOVE BY CHECK MARK NATURE OF REPORT, NOTICE, OR OTHER DATA)

Navajo "P"  
Well No. 12 is located 1420 ft. from ☒ line and 610 ft. from ☒ line of sec. 35  
NE 1/4 SE 1/4 Sec. 35 12-N 17-W N.M.P.M.  
(1/4 Sec. and Sec. No.) (Twp.) (Range) (Meridian)  
Many Rocks Gallup San Juan New Mexico  
(Field) (County or Subdivision) (State or Territory)

The elevation of the derrick floor above sea level is 5496 ft.

OCT 29 1963

DETAILS OF WORK

(State names of and expected depths to objective sands; show sizes, weights, and lengths of proposed casings; indicate mudlogging logs, cementing points, and all other important proposed work)

Well spudded September 11, 1963. Set 7-5/8" OD casing at 30' and cemented with 6 sacks by hand. W.O.G. 24 hours. Drilled to 1220'.

COSE NO. 1 - 1220-1240' - Encased 20'

Top - 7' - Shale with thin streaks of lime  
Next - 2' - Dark gray lime, finely crystalline & glauconitic possible stain dead oil  
Next - 2' - Gray shale  
Next - 6' - Crystalline lime, shaley, sandy  
Next - 2' - Calcareous shale  
Last - 1' - Lime

(SEE REVERSE SIDE)



I understand that this plan of work must receive approval in writing by the Geological Survey before operations may be commenced.

Company Shelly Oil Company

Address Box 730

Hobbs, New Mexico

ILLEGIBLE

By (ORIGINAL) H. E. Aab

Title Dist. Supt.

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	GAS
PRODUCTION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

**FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE**

Company or Operator <b>Shelly Oil Company</b>				Lease <b>Survey 17</b>		Well No. <b>12</b>	
Unit Letter <b>1</b>	Section <b>35</b>	Township <b>32N</b>	Range <b>17W</b>	County <b>San Juan</b>			
Pool <b>Mary Anne Gallup</b>				Kind of Lease (State, Fed Fee) <b>Federal - Indian</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>6</b>	Section <b>34</b>	Township <b>32N</b>	Range <b>17W</b>		
Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/>  <b>El Paso Products Pipeline Corp.</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 1960 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected	Address (give address to which approved copy of this form is to be sent)				

If gas is not being sold, give reasons and also explain its present disposition:

**Gas vented - waiting for gas connection**

**ILLEGIBLE**

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☒ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas ..... ☐ Condensate .. ☐

Remarks

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the **26th** day of **November**, 19 **63**.

**OIL CONSERVATION COMMISSION**

Approved by

Original Signed By  
**A. R. KENDRICK**

Title

**PETROLEUM ENGINEER DIST. NO. 3**

Date

**NOV 27 1963**

By

**E. A. Strickling, Jr.**  
**Area Foreman**

Title

Company

**Shelly Oil Company**

Address

**Box 730, Hobbs, New Mexico**



IN REPLY OF COP. RECEIVED	
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LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

(Form C-104)  
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
**RECEIVED**

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico

November 26, 1963

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Skelly Oil Company

Navajo "P"

Well No. 12

in. RS

1/4

RS

1/4

(Company or Operator)

(Lease)

I

Sec. 35

T. 32N

R. 17W

NMPM.

Many Backs Gallup

Pool

Unit Letter

San Juan

County. Date Spudded. 9-11-63

Date Drilling Completed 9-13-63

Please indicate location:

Elevation 5106' ASL

Total Depth 1375'

PBTD

1359'

Top Oil/Gas Pay 1329'

Name of Prod. Form.

Gallup

PRODUCING INTERVAL -

Perforations 1329-1335'

Open Hole

Depth

1374'

Depth

1351'

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls. water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Size \_\_\_\_\_

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 6 bbls. oil, 0 bbls. water in 24 hrs, 0 min. Size \_\_\_\_\_

GAS WELL TEST -

Natural Prod. Test: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_ Choke Size \_\_\_\_\_

Method of Testing (pitot, back pressure, etc.): \_\_\_\_\_

Test After Acid or Fracture Treatment: \_\_\_\_\_ MCF/Day; Hours flowed \_\_\_\_\_

Choke Size \_\_\_\_\_ Method of Testing: \_\_\_\_\_

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): Treated with 48,300 gals. lease oil & 20,000 20-40 sand.

Casing Press. \_\_\_\_\_ Tubing Press. \_\_\_\_\_ Date first new oil run to tanks October 30, 1963

Oil Transporter El Paso Products Pipeline Company

Gas Transporter \_\_\_\_\_

1430' PSL & 810' PSL  
(FOOTAGE)

Tubing, Casing and Cementing Record

Size	Feet	Size
<u>7-5/8"</u>	<u>30'</u>	<u>8</u>
<u>4-1/2"</u>	<u>1374'</u>	<u>75</u>
<u>2-3/8"</u>	<u>1351'</u>	<u>—</u>

Remarks: Well Pumped 6 barrels in 24 hours.

ILLEGIBLE

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved NOV 27 1963, 19\_\_\_\_

SKELLY OIL COMPANY

(Company or Operator)

By: D. A. Strickling

(Signature)

Title Area Foreman

Send Communications regarding well to:

Name Skelly Oil Company

Address Box 730, Hobbs, New Mexico

OIL CONSERVATION COMMISSION

Original Signed By

By: A. R. KENDRICK

Title PETROLEUM ENGINEER DIST. NO 3

DATE  
Date November 26, 1963

New Mexico Oil Conservation Commission  
1000 Rio Brazos Road  
Astec, New Mexico  
STATE OF New Mexico  
COUNTY OF San Juan

ILLEGIBLE

B. A. Strickling, Jr. of lawful age, being first duly sworn, deposes and says:

That he is employed by Skelly Oil Company in the capacity of Area Foreman and is fully acquainted with the facts as set forth herein.

That during the months of Sept. 1963, Scott Bros. Drilling Company ran the following surveys for Skelly Oil Company on their Navajo lease, Well No. 12, in NE 1/4 of SE 1/4 of Section 35-32N-17W NMPM, Mary Becke Galloway Pool, San Juan County, New Mexico.

SLOPE TEST DATA

<u>Depth In</u>	<u>Angle in Degrees</u>	<u>Depth In</u>	<u>Angle in Degrees</u>
<u>500'</u>	<u>1</u>		
<u>1000'</u>	<u>1</u>		



Subscribed and sworn to before me this 26th day of November

Jesse W. Thompson  
Notary Public in and for said County and State

My Commission expires: 3-16-67

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

B. A. Strickling, Jr.  
Name

Area Foreman  
Position

Box 730, Hobbs, New Mexico  
Address

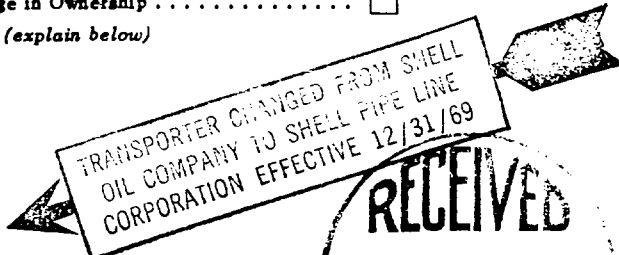

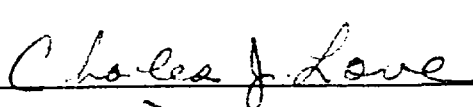
NUMBER OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110  
(Rev. 7-60)

BT

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Skelly Oil Company</b>				Lease <b>Havaje "P"</b>		Well No. <b>12</b>	
Unit Letter <b>"T"</b>	Section <b>35</b>	Township <b>32-N</b>	Range <b>17-W</b>	County <b>San Juan</b>			
Pool <b>Many Rocks Gallup</b>				Kind of Lease (State, Fed, Fee) <b>Federal</b>			
If well produces oil or condensate give location of tanks		Unit Letter <b>"C"</b>	Section <b>34</b>	Township <b>32-N</b>	Range <b>17-W</b>		
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/>  <b>Shell Oil Company</b>				Address (give address to which approved copy of this form is to be sent)  <b>Box 1588 - Farmington, New Mexico</b>			
Is Gas Actually Connected? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/>  <b>None</b>		Date Connected	Address (give address to which approved copy of this form is to be sent)				
If gas is not being sold, give reasons and also explain its present disposition:  <b>Waiting on gas connection - Gas being vented.</b>							
<p align="center">REASON(S) FOR FILING (please check proper box)</p> <p>New Well <input type="checkbox"/> Change in Ownership <input type="checkbox"/>  Change in Transporter (check one) Other (explain below)  Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>  Casing head gas <input type="checkbox"/> Condensate <input type="checkbox"/></p>							
<div style="text-align: right;">   </div>							
Remarks  <b>Change oil transporter from El Paso Natural Gas Products Co. to Shell Oil Company.</b>							
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. Executed this the <b>24th</b> day of <b>April</b> , 19 <b>64</b> .							
OIL CONSERVATION COMMISSION				By			
Approved by							
Original Signed Emery C. Arnold				Title <b>Dist. Engineer</b>			
Title <b>Supervisor Dist. # 3</b>				Company <b>Skelly Oil Company</b>			
Date <b>APR 27 1964</b>				Address <b>Box 730 - Hobbs, New Mexico</b>			

NO. OF COPIES RECEIVED	3
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
OPERATOR	1

# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease Fed <input checked="" type="checkbox"/> Indian <input type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. Cont. #14-200-600-3540

## 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 -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name -----
2. Name of Operator Skelly Oil Company	8. Farm or Lease Name Navajo "P"
3. Address of Operator 330 So. Center-Rm 208, Casper, WY 82601	9. Well No. 12
4. Location of Well UNIT LETTER I 1830 FEET FROM THE S LINE AND 810 FEET FROM THE E LINE, SECTION 35 TOWNSHIP 32N RANGE 17W NMPM.	10. Field and Pool, or Wildcat Many Rocks-Gallup
15. Elevation (Show whether DF, RT, GR, etc.) 5406 KB	12. County San Juan

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

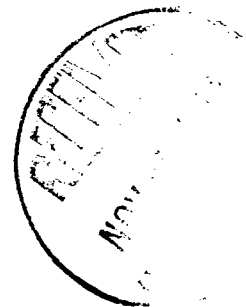
SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Well is to be properly plugged in compliance with NMOCC Rule 202.

Time and date of plugging depends on availability of plugging contractor, therefore, permission is requested for continuation of TA status for one year.



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

SIGNED <u>[Signature]</u>	TITLE <u>Area Superintendent</u>	DATE <u>10/30/74</u>
Original Signed by <u>Therry C. Arnold</u>	TITLE <u></u>	DATE <u>NOV 7 1974</u>

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

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

**SUBMIT IN TRIPLICATE**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

APA Development Inc.

3. Address and Telephone No.

P.O. Box 1093 - Shiprock N.M. 87420

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

183015-810/E 35-32N-17W

7. If Unit or CA, Agreement Designation

NAVAJO TRIBAL

8. Well Name and No.

NAVAJO P #12

9. API Well No.

30045-11156

10. Field and Pool, or Exploratory Area

MANY ROCKS

11. County or Parish, State

SAN JUAN N.M.

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

☐ 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.)\*

This well P12 WAS hot oiled + PUT BACK INTO PRODUCTION as of May 8 1997 - 5 days  
14 MCHRS. IN 300 BGL Tank 4 BBL oil & water per day

RECEIVED  
MAY 15 1997

OIL CON. DIV.  
DIST. 3

070 FARMINGTON, NM

97 MAY 13 AM 10:28

RECEIVED  
BLM

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

Signed

William E. Brown

Title

Pier

Date

5-12-97

(This space for Federal or State office use)

Approved by

Title

Conditions of approval, if any:

ACCEPTED 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.

\*See Instruction on Reverse Side

FARMINGTON DISTRICT OFFICE

RV

Heaving plug—Material ..... Length ..... Depth set .....

Adapters—Material ..... Size .....

### SHOOTING RECORD

Size	Shell used	Explosive used	Quantity	Date	Depth shot	Depth cleaned out
Treated through 4-1/2" OS casing perfor. 1329-1339' with 250 gallons 15% HCl Acid, 48,380 gallons lease oil and 90,000 lb/40 sand.						

### TOOLS USED

Rotary tools were used from 0 feet to 1375 feet, and from ..... feet to ..... feet

Cable tools were used from ..... feet to ..... feet, and from ..... feet to ..... feet

### DATES

....., 19.....

Put to producing ..... October 17, 1963

The production for the first 24 hours was 4 barrels of fluid of which 99.9% was oil; .1% emulsion; .....% water; and .....% sediment.

Gravity, °Bé. 41.2°

If gas well, cu. ft. per 24 hours ..... Gallons gasoline per 1,000 cu. ft. of gas .....

Rock pressure, lbs. per sq. in. ....

### EMPLOYEES

Johnston, Driller ..... Driller

Odum, Driller ..... Driller

### FORMATION RECORD

FROM—	TO—	TOTAL FEET	FORMATION
0	984	984	Sand & Shale - Top Manassas - Surface
984	1186	202	Sand & Shale - Top Middle Gallup - 984'
1186	1331	145	Sand & Shale - Top Lower Gallup - 1186'
1331	1339	8	Sand & Shale - Top Tecate - 1331'
1339	1375	36	Sand & Shale - Top Sanastee - 1339'
	1375		Total Depth
	1359		Plugged Back Total Depth

Geological Tops by Lane Wells Induction Log.

#### CORE NO. 1 - 1220-1240' - Recovered 20'

Top - 7' - Shale with thin streaks of lime  
Next - 2' - Dark gray lime, finely crystalline & glauconitic possible stain dead oil  
Next - 2' - Gray shale  
Next - 6' - Crystalline lime, shaley, sandy  
Next - 2' - Calcareous shale  
Last - 1' - Lime

#### CORE NO. 2 - 1326-1346' - Recovered 20'

Top - 5' - Black shale with thin sand streaks, no shows  
Next - 1' - Gray sandstone with shale streaks, fair stain & odor, horizontal fractures  
Next - 3' - Gray sandstone with good stain & odor, horizontal fractures  
Next - 2' - Tight shaley sandstone with horizontal fractures, fair stain & odor  
Next - 9' - Shale with lime streaks

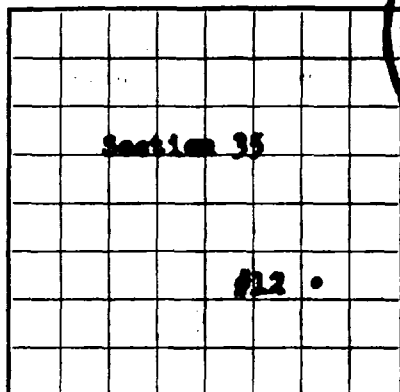
FROM—	TO—	DEPTH FEET	FORMATION
-------	-----	------------	-----------

(OVER)

FORMATION RECORD—CONTINUED

16-43094-5

ILLEGIBLE



LOCATE WELL CORRECTLY



U. S. LAND OFFICE Window Rock  
SERIAL NUMBER 14-20-400-3540  
LEASE OR PERMIT TO PROSPECT FILED

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

1963

U. S. GEOLOGICAL SURVEY  
WINDOW ROCK, ARIZONA

## LOG OF OIL OR GAS WELL

Company Shelly Oil Company Address Box 730 - Hobbs, New Mexico  
Lessor or Tract Navajo "P" Field Mary Rocks Gallup State New Mexico  
Well No. 12 Sec. 35 T. 32N R. 17W Meridian N.M.P.M. County San Juan  
Location 1030 ft. N of A Line and 410 ft. E of B Line of Section 35 Elevation 5406 M  
(Derrick base relative to sea level)

The information given herewith is a complete and correct record of the well and all work done thereon so far as can be determined from all available records.

Signed

(ORIGINAL SIGNED) H. E. AubDate October 24, 1963Title Dist. Sept.

The summary on this page is for the condition of the well at above date.

Commenced drilling September 11, 1963 Finished drilling September 14, 1963

## OIL OR GAS SANDS OR ZONES

(Denote gas by G)

No. 1, from 1331' to 1335' No. 4, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 5, from \_\_\_\_\_ to \_\_\_\_\_  
No. 3, from \_\_\_\_\_ to \_\_\_\_\_ No. 6, from \_\_\_\_\_ to \_\_\_\_\_

## IMPORTANT WATER SANDS

No. 1, from \_\_\_\_\_ to \_\_\_\_\_ No. 3, from \_\_\_\_\_ to \_\_\_\_\_  
No. 2, from \_\_\_\_\_ to \_\_\_\_\_ No. 4, from \_\_\_\_\_ to \_\_\_\_\_

## CASING RECORD

Size casing	Weight per foot	Threads per inch	Make	Amount	Kind of shoe	Cut and pulled from	Perforated		Purpose
							From—	To—	
<u>7-5/8"</u>	<u>10.75</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>
<u>4-1/2"</u>	<u>9.50</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>
HISTORY OF OIL OR GAS WELL									

## MUDDING AND CEMENTING RECORD

Size casing	Where set	Number sacks of cement	Method used	Mud gravity	Amount of mud used
<u>7-5/8"</u>	<u>30'</u>	<u>8</u>	<u>By Hand</u>	<u>1.25</u>	<u>100</u>
<u>4-1/2"</u>	<u>137'</u>	<u>100</u>	<u>Pump &amp; Plug</u>	<u>1.25</u>	<u>100</u>

PLUGS AND ADAPTERS

ILLEGIBLE

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. Cont. 14-200-600-3540	
2. NAME OF OPERATOR Skelly Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
3. ADDRESS OF OPERATOR Box 3360, Casper, WY 82602		7. UNIT AGREEMENT NAME Navajo "P"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1830' FSL & 810' FEL Ne/4 SE/4		8. FARM OR LEASE NAME Navajo "P"	
14. PERMIT NO.		9. WELL NO. 12	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5406' KB		10. FIELD AND POOL, OR WILDCAT Many Rocks-Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 35-T32N-R17W	
		12. COUNTY OR PARISH San Juan	13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <u>Temporarily Abandon</u>	<input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

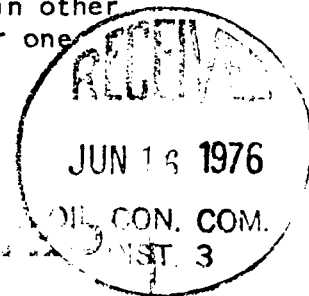
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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 pertinent to this work.)\*

The Gallup zone in this well is depleted and the well was on schedule to be P & A in 1976. A study is now being made for possible recompletions in other zones in this lease and we request a continuation of the TA status for one more year.

TEMPORARY ABANDONMENT  
EXPIRES

JUN 1 1977



JUN 15 1976

U. S. GEOLOGICAL SURVEY  
WASHINGTON, D. C.

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

SIGNED Ray J. McWhorter TITLE Area Superintendent DATE 6/11/76

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:



NO. OF COPIES RECEIVED	7
DISTRIBUTION	
SANTA FE	1
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator Getty Oil Company	
Address Box 3360, Casper, Wyoming 82602	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 12	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-200-600-3540
Location				
Unit Letter I	810	Feet From The East	Line and 1830	Feet From The South
Line of Section 35	Township 32N	Range 17W	NMPM,	San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Shell Pipeline Corp.	Box 1588, Farmington, NM					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RAB, 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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Coke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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)	Coke Size

VI. CERTIFICATE OF COMPLIANCE

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



Area Superintendent

2/4/77

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 15 1977, 19

BY ORIGINAL SIGNED BY H. F. MAXWELL, JR.

TITLE PERMITTEE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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OPERATOR	3
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	
If change of ownership give name and address of previous owner Getty Oil Company, P.O. Box 3360, Casper, Wyoming 82602	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 12	Pool Name, including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location				
Unit Letter I	810	Feet From The East	Line and 1830	Feet From The South
Line of Section 35	Township 32N	Range 17W	, NMPM, San Juan County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, NM 87401					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Stearns  
(Signature)  
co. operator  
(Title)  
Sept 11, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979 R. Kendrick  
Original Signed by  
BY \_\_\_\_\_  
SUPERVISOR DISTRICT # 2  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

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	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR OIL COMPANY	
Address Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 12	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease Federal	Lease No. 14-20-600-3540
Location				
Unit Letter I : 810 Feet From The East Line and 1830 Feet From The South				
Line of Section 35 Township 32N Range 17W , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Ciniza Pipe Line, Inc.	P.O. Box 1887, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Range 17W	Is gas actually connected?	When

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

V. 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 Tanks	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/MCF	Gravity of Condensate
Testing Method (Flow, pump, etc.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

CERTIFICATION

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

*Lucy J. Gray*  
(Signature)  
Office Manager

8-24-82  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED **Aug 20 1982**, 19  
Original Signed by FRANK T. CHAVEZ  
BY  
SUPERVISOR DISTRICT # 3  
TITLE

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
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Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Form C-104 must be filed for each pool in multiply

NO. OF COPIES RECEIVED		
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	GAS	
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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator <u>W T R OIL COMPANY</u>	
Address <u>DRAWER LL CORTEZ COLO - 81321</u>	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner \_\_\_\_\_

DESCRIPTION OF WELL AND LEASE

Lease Name <u>NAVATO P</u>	Well No. <u>12</u>	Pool Name, Including Formation <u>MANY ROCKS GALLUP</u>	Kind of Lease State, Federal or Fee <u>FED</u>	Lease No. <u>14-20-600-3540</u>
Location				
Unit Letter <u>1</u> : <u>1830</u> Feet From The <u>SOUTH</u> Line and <u>810</u> Feet From The <u>EAST</u>				
Line of Section <u>35</u> Township <u>32 N</u> Range <u>R17W</u> , NMPM, <u>SAN JUAN</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<u>GIANT REFINING COMPANY</u>	<u>P.O. BOX 256 - FARMINGTON NM. 87499</u>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	<u>1</u>	<u>35</u>	<u>32N</u>	<u>17W</u>		

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

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, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Perforations		Depth Casing Shoe							
CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					
FEB 28 1984									
OIL CON. DIV.									

TEST DATA AND REQUEST FOR ALLOWABLES (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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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

Lee P. Searcy  
(Signature)  
Office Manager  
(Title)  
Feb 28 - 1984  
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 28 1984, 19\_\_\_\_  
BY Frank J. Searcy  
TITLE SUPERVISOR DISTRICT #1

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply

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 <b>A.P.A. Development Inc.</b>		Well API No.
Address <b>P.O. Box 215, Cortez, CO 81321</b>		
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 checked="" 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 <b>Navajo "P"</b>	Well No. <b>12</b>	Pool Name, Including Formation <b>Many Rocks Gallup</b>	Kind of Lease Navajo State, Federal or Fee <b>14</b>	Lease No. <b>-20-600-3540</b>
Location Unit Letter <b>I</b> : <b>810</b> Feet From The <b>East</b> Line and <b>1830</b> Feet From The <b>South</b> Line Section <b>35</b> Township <b>36N</b> Range <b>17W</b> , NMPM, San Juan County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Giant Refining Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 256, Farmington, NM 87499</b>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit <b>35</b>	Sec. <b>32N</b>
	Twp. <b>17W</b>	Rge. <b>17W</b>
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
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	Choke Size	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	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.

Signature Patrick B. Woosley  
Printed Name **Patrick B. Woosley** Operator  
Date **8/7/90** Telephone No. **(303) 565-2458**

OIL CONSERVATION DIVISION  
AUG 28 1990

Date Approved \_\_\_\_\_  
By Barry J. Chang  
Title **SUPERVISOR DISTRICT 13**

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

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

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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

A.P.A. Development Inc.

3. ADDRESS OF OPERATOR

P.O. Box 215, Cortez, CO 81321

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

810' FEL & 1830' FSL Sec. 35 T32N R17W

14. PERMIT NO.

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

5. LEASE DESIGNATION AND SERIAL NO.

14-20-600-3540

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

14-20-600-3540

9. WELL NO.

P-12

10. FIELD AND POOL, OR WILDCAT

Many Rocks Gallup

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

Sec. 35 T32N R17W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

16

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☒

(Other) Caseing

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANT ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(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.)\*

Repaired production casing above braden head as described in Sundry Notice dated 10/7/88,  
on 10/10/88.

RECEIVED  
AUG 30 1991  
OIL CON. DIV.  
DIST. 3

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

SIGNED

*Pat Woolley*

TITLE Operator

ACCEPTED FOR RECORD

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

AUG 26 1991

DATE

FARMINGTON RESOURCE AREA

BY *SMH*

NMOCD

\*See Instructions on Reverse Side

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 A.P.A. Development, Inc.	Well API No. 300451115600S1
Address P.O. Box 215, Cortez, CO 81321	
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 checked="" 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 Navajo "P"	Well No. 12	Pool Name, Including Formation Many Rocks Gallup	Kind of Lease State, Federal or Fee Navajo	Lease No. 14-20-600-3540
Location Unit Letter I : 810 Feet From The East Line and 1830 Feet From The South Line Section 35 Township 32N Range 17W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary Williams Energy Corporation	Address (Give address to which approved copy of this form is to be sent) 370 - 17th St., Ste 5300, Denver, CO 80202-5653					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit C	Sec. 34	Twp. 32N	Rge. 17W	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
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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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

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.

Signature  
Patrick Woosley  
Printed Name  
12/6/93  
Date  
Operator  
303-565-2458  
Telephone No.

OIL CONSERVATION DIVISION

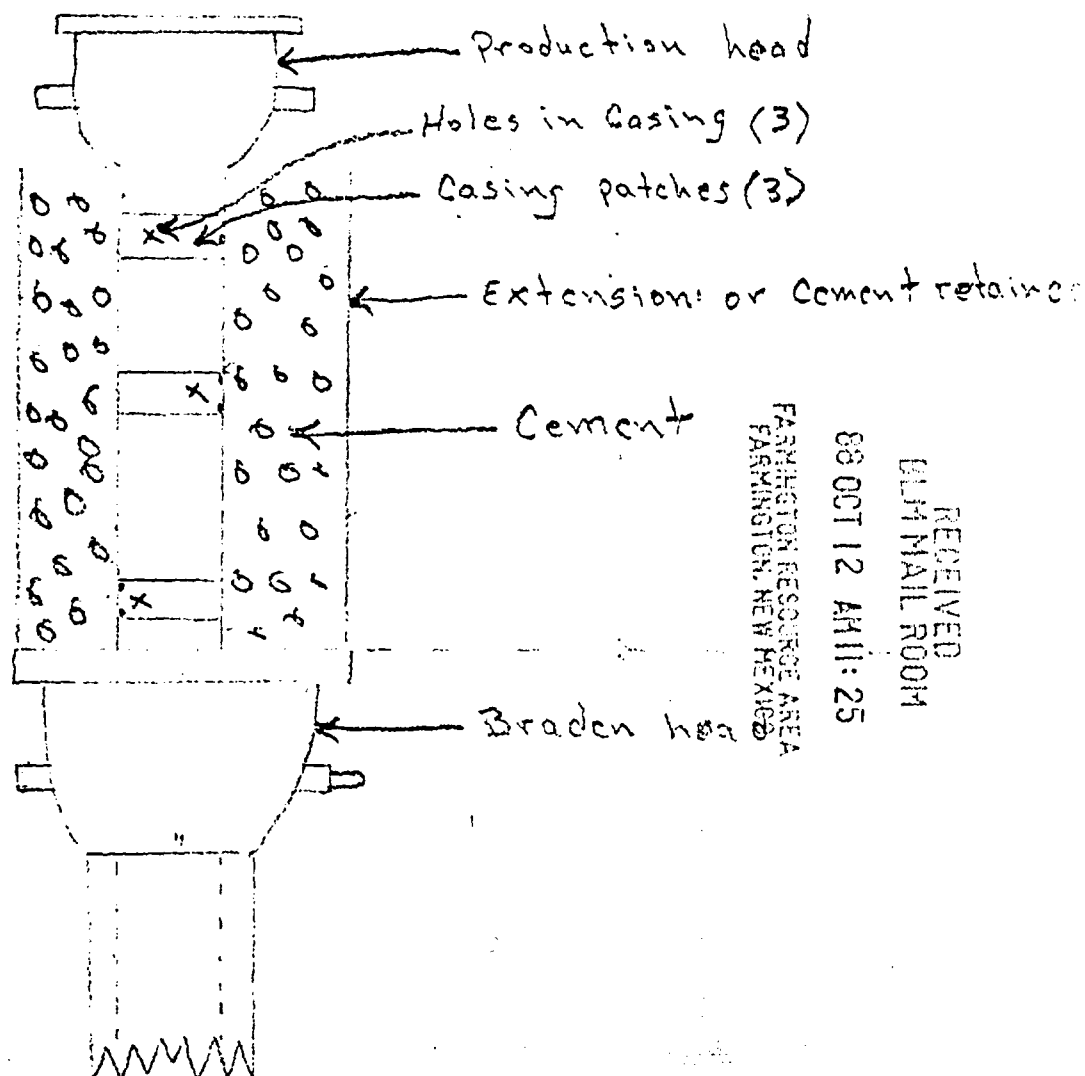
Date Approved DEC 14 1993  
By  
SUPERVISOR DISTRICT #3  
Title

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

Caseing extends 6' above braden head, three holes have been eaten through 4 1/2" caseing. We propose to fix holes with line pipe clamps, extend the surface pipe diameter up to ground level and cover 4 1/2" caseing with cement.

Ground level



FARMINGTON RESOURCE AREA  
FARMINGTON, NEW MEXICO

88 OCT 12 AM 11:25

RECEIVED  
BLM MAIL ROOM



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR	GAS
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED  
OCT 17 1988  
OIL CONSERVATION DIV  
Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
**A.P.A. Development Corporation**

Address  
**P.O. Box 215, Cortez, Colorado 81321**

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "P"</b>	Well No. <b>12</b>	Pool Name, including Formation <b>Many Rocks Gallup</b>	Kind of Lease <b>Navajo</b> State, Federal or Fee <b>14-20-600-3540</b>	Lease No.
Location Unit Letter <b>I</b> : <b>810</b> Feet From The <b>East</b> Line and <b>1830</b> Feet From The <b>South</b> Line of Section <b>35</b> Township <b>32N</b> Range <b>17W</b> , NMPM, <b>San Juan</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Ciniza Pipe Line, Inc. GIANT REFINERY</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1887, Bloomfield, NM 87413</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. is gas actually connected? When
<b>C 34 32N 17W</b>	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Patricia B. Woolley  
(Signature)  
Operator  
(Title)  
10-12-88  
(Date)

OIL CONSERVATION DIVISION  
OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Burt J. Shaw  
TITLE SUPERVISION DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



APA Development.

NAVAJO P14.

D Ø-35-32N-17W

650N. 640W.

45-87060

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

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo Tribe

7. If Unit or CA, Agreement Designation

8. Well Name and No.

14 Navajo P

9. API Well No.

30045 87060

10. Field and Pool, or Exploratory Area

11. County or Parish, State

San Juan, NM

**SUBMIT IN TRIPLICATE**

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator APA Development Corp.

% NMOCO

3. Address and Telephone No.

1000 Rio Brazos Rd. Aztec NM 87410 334-6178

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

35-32N-17W

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 \_\_\_\_\_
- ☐ 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.)\*

See attached plugging procedure.

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

Signed NMOCO Contract Plugging

Date 8/11/00

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date 8/17/00





UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <b>Water Supply Well</b>	5. LEASE DESIGNATION AND SERIAL NO. <b>11-20-600-9540</b>
2. NAME OF OPERATOR <b>Skelly Oil Company</b>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Mountain Tribal</b>
3. ADDRESS OF OPERATOR <b>Box 730 - Hobbs, New Mexico</b>	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <b>650' FWL &amp; 640' FWL of Section 35 - 32N - 17W</b>	8. FARM OR LEASE NAME <b>Maveje "PR"</b>
14. PERMIT NO.	9. WELL NO. <b>14</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>5894' GR</b>	10. FIELD AND POOL, OR WILDCAT
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>Sec. 35 - 32N - 17W</b>
	12. COUNTY OR PARISH 13. STATE <b>San Juan New Mexico</b>

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

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

**Completion Report**REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐(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 pertinent to this work.)\*

Well spudded October 29, 1964. Set 2 joints (80') of new 13-3/8" OD 36.5# Armo SWSJ Casing at 95' and cemented with 100 sacks by the Pump & Plug Process. Cement circulated to surface. Plug down at 1:15 AM October 30, 1964. W.O.C. 24 hours. Reached Total Depth of 2900' on November 3, 1964. Set 88 joints (2844') of new 7" OD 20# & 23# SS J-55 & N-80 casing with Howco Guide Shoe on bottom at 2856' and cemented with 350 sacks by the Pump & Plug Process. Plug down at 4:30 AM November 5, 1964. Temperature Survey indicated cement behind 7" OD casing at 800'. W.O.C. 48 hours. Shut off tested OK. The 7" OD casing is slotted with 2' x 1/8" wide slots staggered four feet apart from 2606' to 2856'. A string of 1" tubing was welded to the outside of the 7" OD casing to a depth of 2841' for treating purposes. Moved in and rigged up pulling unit December 18, 1964. Drilled out cement from 2520 to 2572' and circulated hole clean to 2856'. P.B.T.D. 2856'. Moved out pulling unit on December 23, 1964. Waiting on pumping equipment from December 23, 1964 to March 31, 1965. Moved in and rigged up pulling unit on March 31, 1965. Ran 2-1/2" - 40 HP G-52E Reda Pump on 56 joints of 2-7/8" OD Euc 6.5# S-R SS J-55, Range 2 tubing. Reda Pump set at 1678'.

Tested well for 7 hours at 90 barrels of water per hour for a 24 hour total of 2160 barrels of water. This well completed in the Morrison Formation.

This well completed on April 5, 1965, as a Water Supply Well for the Many Rocks Pressure Maintenance Project.

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

SIGNED

(ORIGINAL) **H. E. Aab**

TITLE

**Dist. Supt.**DATE **April 7, 1965**

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APR 13 1965

\*See Instructions on Reverse Side

ILLEGIBLE

RECEIVED

APR 12 1965

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.



# NEW MEXICO LAND GRANT COMMISSION

## New Mexico Oil and Gas Lease Plot

SECTION A

Date: October 22, 1964

Operator: Four States Engineering Co.

Well Name: 32 North Range: 17 West

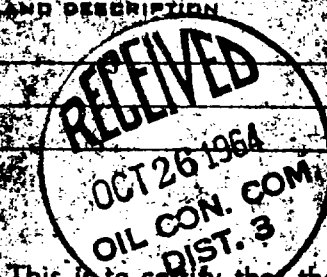
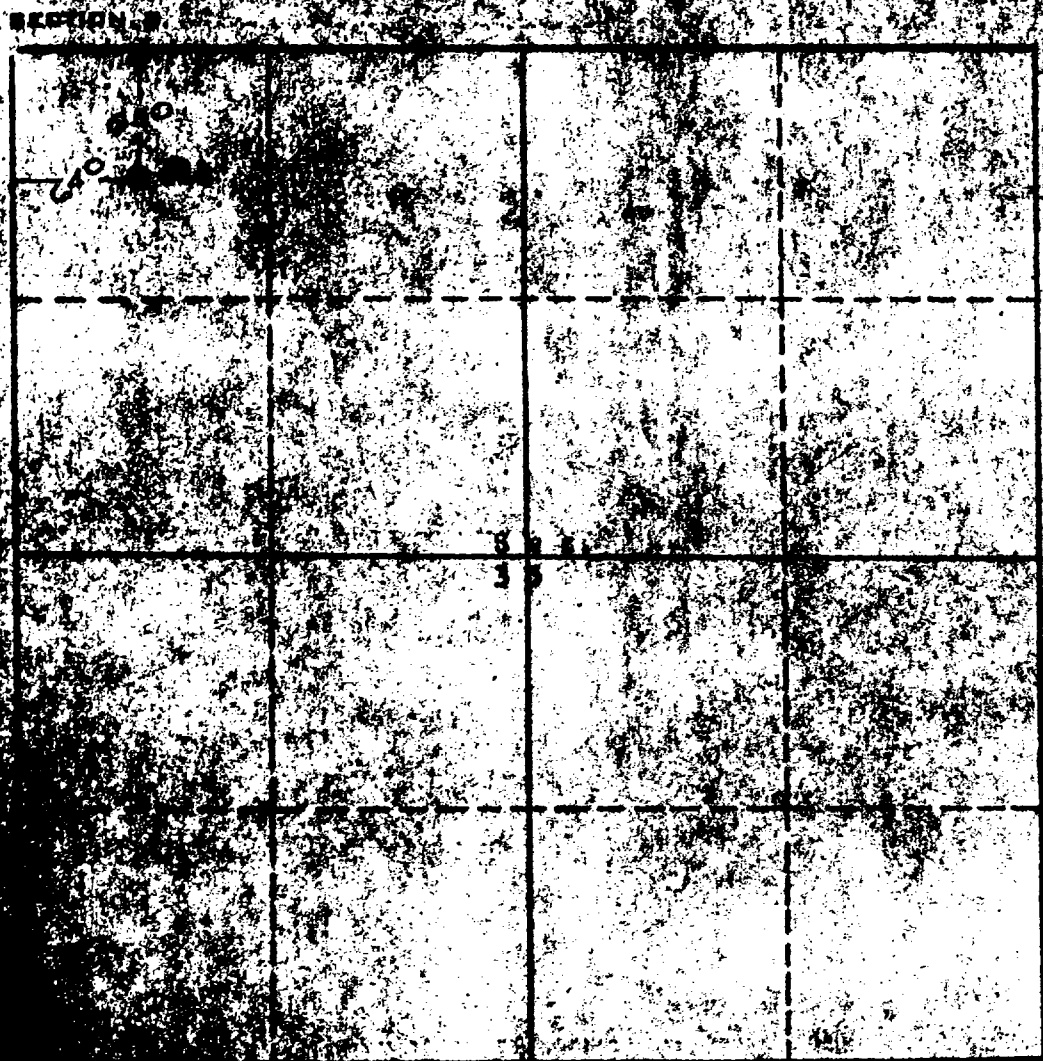
Located: 32 North Feet from Well

County: San Juan Dedicated Acreage: 10

Zone: 10

1. Is the above the only owner in the section having an interest on the plot below? Yes X No
2. If answer to question One is "No" have all interests of the owners been consolidated by common agreement or otherwise? Yes No If answer is "Yes," Type of Consolidation
3. If the answer to question Two is "No" list all the owners and their respective interests below:

OWNER	LAND DESCRIPTION
<b>ILLEGIBLE</b>	



This is to certify that the information in Section A above is true and complete to the best of my knowledge and belief.

**Stally Oil Company**  
(OPERATOR)  
(ORIGINAL SIGNED) **H. E. Aab**  
State, New Mexico  
(REPRESENTATIVE)

**For 100 - 1000, For 1000 - 10000**

**SURVEYOR**

To certify that the well location shown on the map in Section B is plotted from the notes of actual survey made by or under the supervision of the Surveyor and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed Oct 10, 1964  
**Four States Engineering Co.**  
FARMINGTON, NEW MEXICO  
*Emmett E. Eads*  
REGISTERED ENGINEER OR LAND SURVEYOR

Certificate No. 3602

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
BLM

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 Water Supply Well

2. Name of Operator

APA Development, Inc.

3. Address and Telephone No.

P.O. Box 215 Cortez, CO. 81321 (303) 565-2958

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

650' FNL 640' FNL Sec 35, T32N R17W

5. Lease Designation and Serial No.

41-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

Navajo "P"

8. Well Name and No.

14

9. API Well No.

30045870600051

10. Field and Pool, or Exploratory Area

Many Rocks

11. County or Parish, State

San Juan N.M.

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

☐ 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.)

Plan to Plug Well as follows:

1. equalize cement plug from 2856 - 2556
2. Pick up to 2555 circulate inhibited fluid to 100'
3. Circulate cement 100' to surface
4. Circulate cement 100' to surface between 7" and 13 3/8" casing
5. Weld on dry hole marker, clean and remediate location.

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

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

Signed Patricia W. Long

Title

Date 10/14/94

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date

APPROVED

OCT 20 1994

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



Navajo P-14

Lease # 14-20-600-3540

\* Water Supply Well

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT  
FARMINGTON DISTRICT OFFICE

1235 La Plata Highway  
Farmington, New Mexico 87401

Attachment to Notice of

Re: Permanent Abandonment

Intention to Abandon

Well: **14 Navajo P**

CONDITIONS OF APPROVAL

1. Plugging operations authorized are subject to the attached "General Requirements for Permanent Abandonment of Wells on Federal and Indian Leases."
2. **Mike Flaniken** with the Farmington Office is to be notified at least 24 hours before the plugging operations commence (505) 599-8907.
3. The following modifications to your plugging program are to be made (when applicable):
  - \* 1. RIH with tubing to 2856' to ensure the bottom of the 1.0" is not covered with fill. Load 7" casing with water. Establish an injection rate down the 1.0" and pump adequate cement to fill the 1.0", shut in the 7.0" casing to keep the cement in the 1.0" and allow the cement to set.
  - 2. Extent cement plug from 2856' to 2501'. **Tag top of cement plug @ 2501'.**
  - 3. Spot a cement plug from 2296' to 2196' inside the casing plus 50 linear feet excess. (top of Dakota @ 2246')
  - 4. Spot a cement plug from 1489' to 1389' inside the casing plus 50 linear feet excess. (top of Gallup @ 1439')
  - 5. Perforate @ 366' and place a cement plug from 366' to 266' inside and outside the casing, plus 100% excess cement in the annulus and 50 linear feet excess in the casing. ( Bottom of Point Lookout @ 316')
  - 6. Extend surface plug from 145' to the surface on the inside and outside of the casing. (surface casing @ 95')

**Note:** The above modifications are minimum standards. It is acceptable to pump additional cement and combine plugs.

\* If an injection rate **can not** be established down the 1.0", spot lower cement plugs, cut 7.0" casing off at 366', pull casing, and spot a cement plug from 366' to the surface.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES DESIRED	
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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

R

I. Operator  
**A.P.A. Development Corporation**  
Address  
**P.O. Box 215, Cortez, Colorado 81321**  
Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☒ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)

If change of ownership give name and address of previous owner **Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Navajo "P"</b>	Well No. <b>14</b>	Pool Name, including Formation <b>Morrison Form</b>	Kind of Lease <b>Water Supply</b>	Lease No. <b>14-20-600-3540</b>
Location Unit Letter <b>D</b> : <b>640</b> Feet From The <b>West</b> Line and <b>650</b> Feet From The <b>North</b> Line of Section <b>35</b> Township <b>32N</b> Range <b>17W</b> , NMPM, <b>San Juan</b> 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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

*Patricia B. Woolley*  
(Signature)  
Operator  
(Title)  
10-12-88  
(Date)

OIL CONSERVATION DIVISION  
OCT 17 1988

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY *Brian D. Shaw*  
TITLE **SUPERVISION DISTRICT # 3**

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

November 1983)  
Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse side)

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.)

1. OIL WELL ☐ GAS WELL ☐ OTHER WSW

2. NAME OF OPERATOR APA Development Inc.

3. ADDRESS OF OPERATOR Box 215 Cortez CO 81321

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface 650' FNL + 640' FWL  
Sec. 35 T32N R17W

14. PERMIT NO. \_\_\_\_\_ 15. ELEVATIONS (Show whether DF, RT, CR, etc.) \_\_\_\_\_

5. LEASE DESIGNATION AND SERIAL NO. 14-20-600-3540

6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo

7. UNIT AGREEMENT NAME \_\_\_\_\_

8. FARM OR LEASE NAME Navajo "P"

9. WELL NO. 14

10. FIELD AND POOL, OR WILDCAT Many Rocks GAILING

11. SEC., T., S., M., OR BLM, AND SURVEY OR AREA Sec 35 T32N R17W

12. COUNTY OR PARISH San Juan 13. STATE NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐ PUMP OR ALTER CASING ☐  
FRACTURE TREAT ☐ MULTIPLE COMPLETE ☐  
SHOOT OR ACIDIZE ☐ ABANDON\* ☐  
REPAIR WELL ☐ CHANGE PLANT ☐

WATER SHUT-OFF ☐ REPAIRING WELL ☐  
FRACTURE TREATMENT ☐ ALTERING CASING ☐  
SHOOTING OR ACIDIZING ☐ ABANDONMENT\* ☐

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

17. WORKING 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.

Plan to condition well back to active water supply for pressure maintenance of Navajo "P" and Navajo "M" Leases.

RECEIVED

MAR 27 1992

OIL CON. DIV.  
DIST. 3

919 FARMINGTON, N.M.

92 MAR 17 PM 1:55

RECEIVED  
BLM

THIS APPROVAL EXPIRES APR 01 1993

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

SIGNED Pat Woolley TITLE \_\_\_\_\_ DATE 3/13/92

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE APPROVED

CONDITIONS OF APPROVAL, IF ANY:

MAR 26 1992

AREA MANAGER

\*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.

NMOCD

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

5. Lease Designation and Serial No.  
**14-20-600-3540**

6. If Indian, Allottee or Tribe Name

**NAVAJO**

7. If Unit or CA, Agreement Designation

8. Well Name and No.

**NAVAJO "P" # 14**

9. API Well No.

**30045870600051**

10. Field and Pool, or Exploratory Area

**MANY ROCKS**

11. County or Parish, State

**SAN JUAN, NM**

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other **WSW**

2. Name of Operator

**A.P.A. Development, Inc.**

3. Address and Telephone No.

**P.O. Box 215, Cortez, CO 81321 303-565-2458**

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

**650' FNL + 640' FWL**

**Sec. 35 T32N R17W**

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 **WSW**

- ☐ 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.)\*

We plan to condition back to  
WSW in 1993.

RECEIVED  
BLM

93 MAY 19 AM 11:41

070 FARMINGTON, NM

RECEIVED

APR 07 1993

THIS APPROVAL EXPIRES

ON CON. DR.

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

Signed **Pat Worsley**

Title

Date **5-15-92**

(This space for Federal or State office use)

Approved by  
Conditions of approval, if any:

Title

**APPROVED**

**MAY 20 1993**

**DISTRICT MANAGER**

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

NMOCD

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

INS Well

2. Name of Operator

APA Development Inc

3. Address and Telephone No.

PO Box 1093 Shiprock NM 87460

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

N014 NAUASOP 650 FNL + 640 FW L

Sec 35 100 14 20 600 3540 T32N, R17W

5. Lease Designation and Serial No.

14206003540

6. If Indian, Allottee or Tribe Name

NAVAJO TRIBAL

7. If Unit or CA, Agreement Designation

8. Well Name and No. N014 NAUASOP

9. API Well No. 14206003540

10. Field and Pool, or Exploratory Area

MANY ROCKY

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

☐ 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.)

N014 NAUASOP WATER SUPPLY PUMP WILL  
Be used in oil Recovery AFTER INERT GAS  
and CO<sub>2</sub> INJECTED - This well has Baker  
Centrifugal water pump for final miscible  
waterflood in approx 12 months or less

RECEIVED  
JUN - 6 1997

OIL CON. DIV.

070 FARMINGTON, NM  
07 JUN - 2 PM 3:01

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

Signed William E. Spencer

Title Pres

Date 6-1-97

(This space for Federal or State office use)

Approved by /s/ Duane W. Spencer

Title

Date JUN - 4 1997

Conditions of approval, if any:

NO. OF COPIES RECEIVED		5
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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		3
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Fbim C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator Getty Oil Company	
Address Box 3360, Casper, WY 82602	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner Skelly Oil Company, Box 3360, Casper, WY 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 14	Pool Name, Including Formation Morrison Form	Water Supply	Kind of Lease State, Federal or free	Lease No. 14-20-600-3540
Location					
Unit Letter D ; 640 Feet From The West Line and 650 Feet From The North					
Line of Section 35 Township 32N Range 17W, 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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Pge.	Is gas actually connected?	When

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

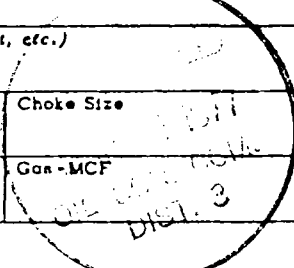
IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'y.	Diff. Rest'y.
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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shot-in)	Casing Pressure (shot-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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

(Signature)

Area Superintendent  
(Title)

3/2/77

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY ORIGINAL SIGNATURE OF \_\_\_\_\_, JR.  
TITLE \_\_\_\_\_ NO. 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multiply

NO. OF COPIES RECEIVED	6
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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	4
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator WTR Oil Company	
Address P.O. Drawer LL, Cortez, Colorado 81321	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner  
Getty Oil Company, P.O. Box3360, Casper, Wyoming 82602

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "p"	Well No. 14	Pool Name, Including Formation Morrison Form	Water Supply	Kind of Lease Federal	Lease No. 14-20-600-3540
Location					
Unit Letter D	640	Feet From The West	Line and 650	Feet From The North	
Line of Section 35	Township 32N	Range 17W	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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
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:

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

James P. Shoolley  
(Signature)  
CO-Operator  
(Title)  
Sept 11, 1979  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1979, 19  
Original Signed by A. R. Kendrick

BY SUPERVISOR DISTRICT # 3

TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.



NO. OF COPIES RECEIVED		
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	GAS	
OPERATOR		
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NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I. Operator  
BayStar Petroleum Corporation  
Address  
P. O. Box 2975, Corpus Christi, Texas 78403  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
Water Supply Well

If change of ownership give name and address of previous owner  
WTR Oil Company, Drawer LL, Cortez, Colorado 81321

II. DESCRIPTION OF WELL AND LEASE

Lease Name Navajo "P"	Well No. 14	Pool Name, including Formation <del>Many Rocks Gallup</del>	Kind of Lease <del>Federal</del> Navajo	Lease No. 14-20-600-3540
Location Unit Letter D : 650 Feet From The North Line and 640 Feet From The West Line of Section 35 Township 32N Range 17W , 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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
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:

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 Tanks	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/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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

Michael H. North, President

May 8, 1985

(Date)

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.



7.20.2000

APA Development.  
NAVAJO ~~B~~ #19  
K-26-32N 17W  
1450S 1980W.  
4S-26728

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 *APA Development Corp.*

*% NMOCO*

3. Address and Telephone No.

*1000 Rio Grande Rd. Aztec NM 87410 334-6178*

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

*26-32N-17W 1450/5-1980/W*

5. Lease Designation and Serial No.

*14-20-600-3540*

6. If Indian, Allottee or Tribe Name

*Navajo Tribe*

7. If Unit or CA, Agreement Designation

8. Well Name and No.

*19 Navajo P*

9. API Well No.

*30045 26728*

10. Field and Pool, or Exploratory Area

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 \_\_\_\_\_  
☐ 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.)\*

*See attached plugging procedure.*

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

Signed *NMOCO Contract Plugging*

Date *8/11/00*

(This space for Federal or State office use)

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date *8/17/00*



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

PLUG BACK ☐

b. TYPE OF WELL

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

SINGLE  
ZONE ☒

MULTIPLE  
ZONE ☐

2. NAME OF OPERATOR

BAYSTAR PETROLEUM

3. ADDRESS OF OPERATOR

17400 Dallas Parkway, Suite 210, Dallas, Texas 75252

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

At surface

1980' FWL & 1485' FSL, Sec. 26-T32N-R17W

At proposed prod. zone

1980' FWL & 1485' FSL, Sec. 26-T32N-R17W

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

12.5 miles NE from Shiprock, New Mexico

10. DISTANCE FROM PROPOSED\*

LOCATION TO NEAREST  
PROPERTY OR LEASE LINE, FT.  
(Also to nearest drig. unit line, if any)

1485'

16. NO. OF ACRES IN LEASE

1920

17. NO. OF ACRES ASSIGNED  
TO THIS WELL

40

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

1866'

19. PROPOSED DEPTH

1850'

20. ROTARY OR CABLE TOOLS

Rotary

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

5857. G.R. DRILLING OPERATIONS AUTHORIZED ARE

22. APPROX. DATE WORK WILL START\*

When approved

23. SUBJECT TO COMPLIANCE WITH ATTACHED

"GENERAL REQUIREMENTS"

PROPOSED CASING AND CEMENTING PROGRAM

This action is subject to technical and  
procedural review pursuant to 43 CFR 3185.3  
and appeal pursuant to 43 CFR 3185.4.

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH
9"	7"	J-55; 23#	90'
6 1/2"	4 1/2"	J-55; 9.5#	1850'

35 sk Circ to surface  
50 sks

Per Blm - enough to cover water  
and producing zones  
up hole.

Drill 9" hole and set 90' of 7", 23#/ft. surface casing cement to surface. Nipple blow-out preventors and test to 2000 psi. Drill 6 1/2" hole with air to total depth. Take drilling sample every 5' to total depth. At total depth run Compensated Density log with Induction Microlog. If feasible, run 4 1/2" casing to total depth, cement with 50 sks of 50/50 POZ - mix cement. Perforate zone at 2 shots per foot and fracture stimulate if feasible. Top of Gallup is expected at 1764'. Surface Pipe Cement - 35 sks Class "B" w/ 2% CaCl and 1# flowseal, wt. 15#/gal. Production Pipe Cement - 50 sks, 50/50 POZ mix with 2% gel, 10% Salt and 10% CaCl, wt. 13.5#/gal. Top of cement est. 1550'.

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 grid depths. Give blowout preventer program, if any.

24.

SIGNED

William Yachan

TITLE

Engineer

DATE

3/3/86

(This space for Federal or State office use)

"Approval of this action does  
not warrant that the applicant  
holds legal or equitable rights  
or title to this lease."

APPROVAL DATE

APPROVED

AS AMENDED

DATE

APR 29 1986

/s/ J. Stan McKee

ACTING AREA MANAGER

\*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.

**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102  
Supersedes C-12  
Effective 1-4-85

All distances must be from the outer boundaries of the Section.

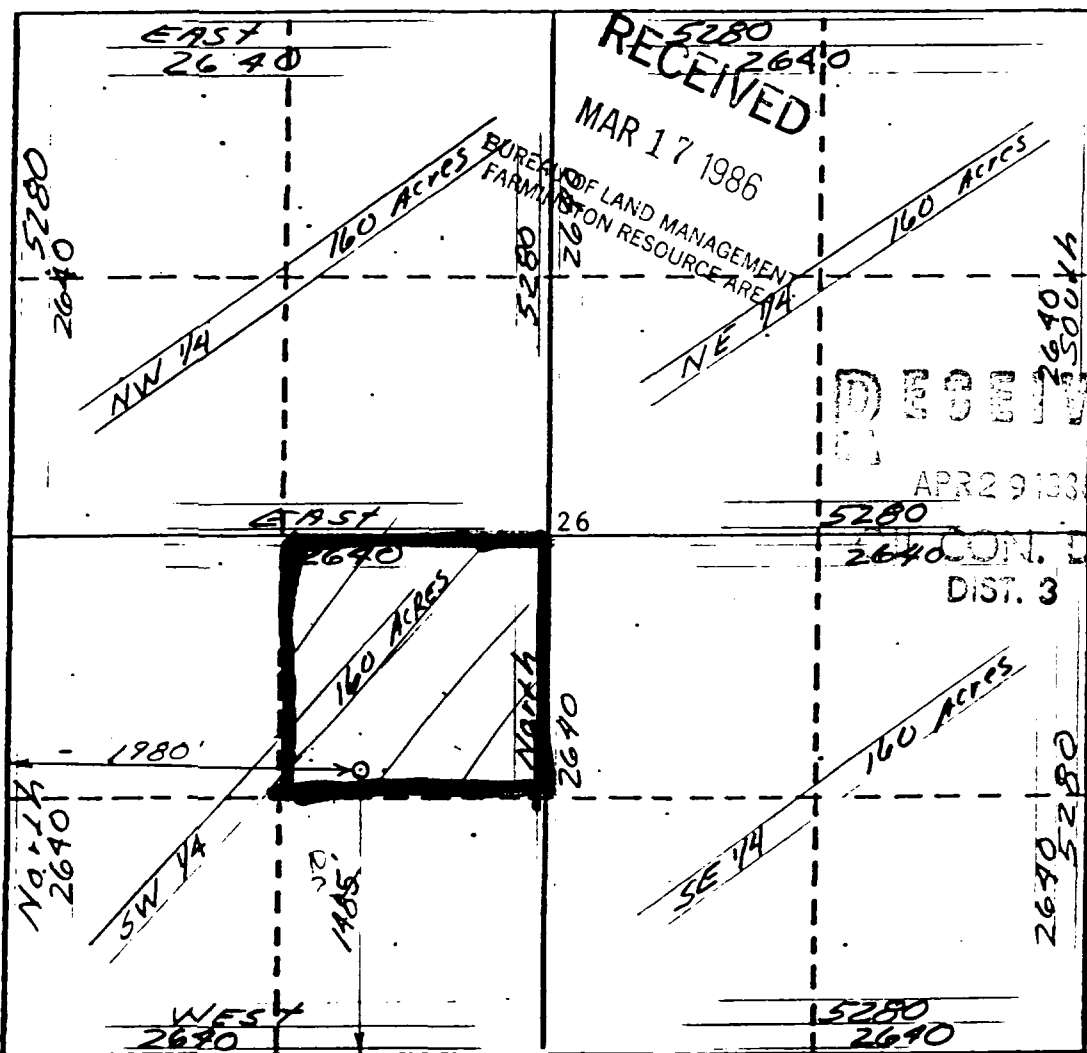
Operator <b>JOHN H. WELLS CO. <i>Baystar Petroleum</i></b>		Lease <b>NAVAJO "P"</b>		Well No. <b>19</b>
Unit Letter <b>K</b>	Section <b>26</b>	Township <b>32 NORTH</b>	Range <b>17 WEST</b>	County <b>SAN JUAN</b>
Actual Fastest Location of Well: <b>1485</b> feet from the <b>SOUTH</b> line and <b>1980</b> feet from the <b>WEST</b> line				
Ground Level Elev. <b>5857</b>	Producing Formation <b>GALLUP</b>	Pool <b>MANY ROCKS EXT</b>	Dedicated Acreage <b>40</b> Acres	

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 interests 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 interests, has been approved by the Commission.



**CERTIFICATION**

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

*William W. Jacobs*

Name  
**Engineer**

Position  
**BAYSTAR Petroleum**

Date  
**2/13/86**

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.

7259

*George R. Tompkins*

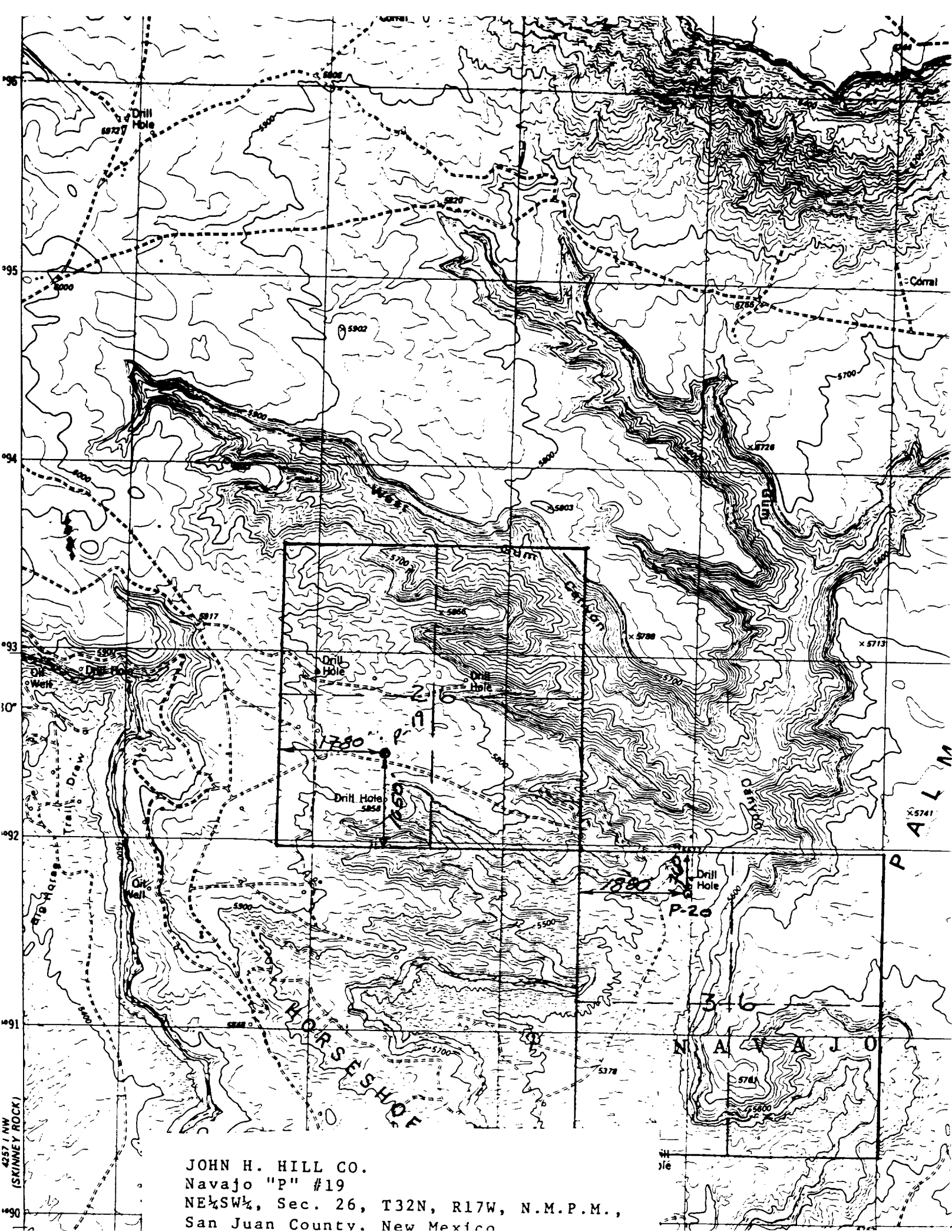
Date Surveyed  
**February 6, 1986**

Registered Professional Engineer  
and/or Land Surveyor

**George R. Tompkins**

Certificate No.  
**7259**





UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil ☒ well ☐ gas well ☐ other  
2. NAME OF OPERATOR  
Baystar Petroleum  
3. ADDRESS OF OPERATOR 17400 Dallas Parkway,  
Suite 210, Dallas, TX 75252  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17  
below.)  
AT SURFACE: 1980 FWL & 1450 FSL, Sec. 36, T32N, R17E  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☒  
SHOOT OR ACIDIZE ☒  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) \_\_\_\_\_

SUBSEQUENT REPORT OF:

☐  
☐  
☐  
☐  
☐  
☐  
☐  
☐ BUREAU OF LAND MANAGEMENT  
☐ FARMINGTON RESOURCE AREA

**RECEIVED**

MAY 14 1986

(NOTE: Report results of multiple completion or zone  
change on Form 9-330.)

5. LEASE  
~~Navajo~~ -P- 14-20-600-3540  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
Navajo  
7. UNIT AGREEMENT NAME  
8. FARM OR LEASE NAME  
Navajo -P-  
9. WELL NO.  
19  
10. FIELD OR WILDCAT NAME  
Many Rocks (Gallop)  
11. SEC., T., R., M., OR BLK. AND SURVEY OR  
AREA  
26, T32N, R17E W  
12. COUNTY OR PARISH  
San Juan  
13. STATE  
New Mexico  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
5857'

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 pertinent to this work.)\*

We propose to perforate the Gallup sand with 2 shots per foot from 1763,  
1766, 1767, 1768. Swab the well down and acidize with 500 gallons of 15% HCL  
on 05/12/86. We then plan to hydraulically fracture with 40.000# of 20/40  
mesh sand with foamed KCL water and blow probably on 05/13/86.

Previously Approved in APD package dated 4/25/86.

**RECEIVED**  
MAY 19 1986  
OIL CON. DIV.  
DIST. 3  
Set @ \_\_\_\_\_ Ft.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED [Signature] TITLE Engineer DATE May 9, 1986

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOCC



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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 Form 9-331-C for such proposals.)

1. oil ☒ well gas ☐ well other ☐  
2. NAME OF OPERATOR  
Baystar Petroleum  
3. ADDRESS OF OPERATOR 17400 Dallas Parkway,  
Suite 210, Dallas, TX 75252  
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17  
below.)  
AT SURFACE: 1980 FWL & 1450 FSL, Sec. 36, T32N, R17E  
AT TOP PROD. INTERVAL: Same  
AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE,  
REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☒  
SHOOT OR ACIDIZE ☒  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) ☐

SUBSEQUENT REPORT OF:

☐  
☒  
☒  
☐  
☐  
☐  
☐  
☐  
BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

RECEIVED

MAY 16 1986

(NOTE: Report results of multiple completion or zone  
change on Form 9-330.)

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 pertinent to this work.)\*

We perforated the Gallup Sand with 2 shots per foot from 1763, 1766,  
1767, 1768. Swabbed the well down and acidized with 500 gallons of 15% HCL  
on 05/13/86. We plan to hydraulically fracture with 40,000# of 20/40 mesh  
sand with foamed KCL water and blow probably on 05/14/86.

Please file spud + csg. reports by 6/13/86

RECEIVED

MAY 21 1986

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_

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

SIGNED William Jackson TITLE Engineer DATE MAY 14 1986

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE MAY 17 1986

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA

BY fr

\*See Instructions on Reverse Side

NMOCC



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*

(See other In-  
structions on  
reverse side)

Form approved.  
Budget Bureau No. 1004-0137  
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

RECEIVED

JUN 30 1986

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other ☐

b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. REVS. ☐ Other ☐

2. NAME OF OPERATOR

Baystar Petroleum

3. ADDRESS OF OPERATOR

17400 Dallas Parkway, Suite 210, Dallas, Texas 75252

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

At surface 1980' FWL & 1450' FSL, Sec. 36-T32N-R17W

At top prod. interval reported below

At total depth Same

14. PERMIT NO. DATE ISSUED  
04/25/86

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

LEASE DESIGNATION AND SERIAL NO.

14 20 600 3540

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo -P-

9. WELL NO.

19

10. FIELD AND POOL, OR WILDCAT

Many Rocks (Gallup)

11. SEC. T. R. M. OR BLOCK AND SURVEY OR AREA

26-T32N-R17W

12. COUNTY OR PARISH San Juan

13. STATE New Mexico

15. DATE SPUDDED 04/30/86 16. DATE T.D. REACHED 05/04/86 17. DATE COMPL. (Ready to prod.) 05/14/86 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)\* 5857' GR 19. ELEV. CASINGHEAD 5855'

20. TOTAL DEPTH, MD & TVD 1820' 21. PLUG BACK T.D., MD & TVD 1810' 22. IF MULTIPLE COMPL., HOW MANY\* No 23. INTERVALS DRILLED BY Rotary Tools X Cable Tools

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 1763'- 1768' Gallup Sand 25. WAS DIRECTIONAL SURVEY MADE No

26. TYPE ELECTRIC AND OTHER LOGS RUN CNL-CDL, DIL-GR 27. WAS WELL CORED No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
7"	23# N-80	97.5'	9-3/4"	45 sks class -B- 2% CaCl	None
4 1/2"	10.5# J-55	1817.45'	6 1/2"	35 sks 50/50 Poz-2% CaCl	None

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	BACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					2-3/8"	1810'	None

31. PERFORATION RECORD (Interval, size and number)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
1763-68'	500 gals 15% HCl, frac w/ 40,000# 20/40 sand with N <sub>2</sub> foam.

33.\* PRODUCTION

DATE FIRST PRODUCTION 06/21/86 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping; 1 1/2" insert pump WELL STATUS (Producing or shut-in) Producing

DATE OF TEST 06/22/86 HOURS TESTED 24 CHOKE SIZE N/A PROD'N. FOR TEST PERIOD .5 OIL—BBL. TSTM GAS—MCF. 0 WATER—BBL. TSTM GAS-OIL RATIO

FLOW. TUBING PRESS. 0. CASING PRESSURE 0. CALCULATED 24-HOUR RATE .5 OIL—BBL. TSTM GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)

34. DISPOSITION OF GAS (Bold, used for fuel, vented, etc.) Vented TEST WITNESSED BY JUL 22 1986

35. LIST OF ATTACHMENTS Logs already forwarded to BLM.

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED [Signature] TITLE Engineer DATE 06/25/86

\*(See Instructions and Spaces for Additional Data on Reverse Side) Enclosure 4

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION RESOLVE AREA  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED  
OCT 27 PM 12:53

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

RECEIVED  
OCT 31 1988

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator  
A.P.A. Development Corporation

Address  
P.O. Box 215, Cortez, Colorado 81321

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner Baystar Petroleum Corporation, P.O. Box 7379, Albuquerque, NM 87194

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Navajo "P"</u>	Well No. <u>19</u>	Pool Name, Including Formation <u>Many Rocks Gallup</u>	Kind of Lease <u>Navajo</u> State, Federal or Fee <u>14-20-600-3540</u>	Lease No.
Location				
Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>West</u> Line and <u>1450</u> Feet From The <u>South</u>				
Line of Section <u>26</u> Township <u>32N</u> Range <u>17W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Enliza Pipe Line, Inc.</u>	<u>P.O. Box 1887, Bloomfield, NM 87413</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	
Unit <u>C</u> , Sec. <u>34</u> , Twp. <u>32N</u> , Rge. <u>17W</u>	Is gas actually connected? <u>When</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Patricia B. Woolley  
(Signature)  
Operator  
(Title)  
10-26-88  
(Date)

OIL CONSERVATION DIVISION  
OCT 31 1988  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY [Signature]  
TITLE SUPERVISION DISTRICT # 3

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

November, 1983  
Formerly 9-331

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

(Other instructions on reverse side)

EXPIRES AUGUST 31, 1987  
5. LEASE DESIGNATION AND SERIAL NO.  
14-20-600-3540  
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.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
A.P.A. Development Inc.

3. ADDRESS OF OPERATOR  
Box 215 Cortez CO 81321

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

1980' FWL + 1450' FSL

Sec 26 T32N R17W

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, AT, GR, etc.)

7. UNIT ASSIGNMENT NAME  
Navajo

8. FARM OR LEASE NAME

Navajo "P"

9. WELL NO.

# 19

10. FIELD AND POOL, OR WILDCAT

Many Rocks Gally

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

Sec 26 T32N R17W

12. COUNTY OR PARISH 13. STATE

San Juan NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

SHOOT OR ACIDIZE ☐

ABANDON\* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) Produce

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT\* ☐

(Other)

(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 slopes pertinent to this work.)

Plan to put back on production

RECEIVED  
MAR 27 1992  
OIL CON. DIV.  
DIST. 3

RECEIVED  
BLM  
92 MAR 17 PM 1:57  
019 FARMINGTON, N.M.

THIS APPROVAL EXPIRES APR 01 1993

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

SIGNED Pat Wooley

TITLE

DATE 3/13/92

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

MAR 26 1992

AREA MANAGER

\*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.

NMOCD

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

NAVAJO

7. If Unit or CA. Agreement Designation

8. Well Name and No.

NAVAJO "P" #19

9. API Well No.

30045267280051

10. Field and Pool, or Exploratory Area

Mary Rocks

11. County or Parish, State

SAN JUAN, NM

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

A.P.A. Development, Inc.

3. Address and Telephone No.

P.O. Box 215, Cortez, CO 81321 303-565-2458

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

1980' FWL + 1450' FSL

Sec. 26 T32N R17W

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 POW  
☐ 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.)

We are in the process of  
conditioning this well  
back to producing. Have run  
the rods in and are waiting  
for a pumping unit.

RECEIVED  
BLM  
93 MAY 19 AM 11:15  
070 FARMINGTON

MAY 24 1993  
OIL CON. DIV.  
DIST. 2

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

Signed Pat Woolley

Title

Date 5-15-93

(This space for Federal or State office use)

Approved by  
Conditions of approval, if any:

Title

ACCEPTED FOR RECORD

MAY 20 1993

FARMINGTON DISTRICT OFFICE

\*See Instruction on Reverse Side

BY

NMCCO

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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

A.P.A. Development, Inc.

3. Address and Telephone No.

P.O. Box 215 Cortez, CO. 81321 (303) 565-2458

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

1980' FWL 1450' FSL Sec 26 T32N R17W

5. Lease Designation and Serial No.

H-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

Navajo "P"

8. Well Name and No.

P-19

9. API Well No.

30045267280051

10. Field and Pool, or Exploratory Area

Many Rocks G.A.

11. County or Parish, State

San Juan N.M.

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 \_\_\_\_\_
- 
- ☐
- 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.)

Well is currently being put back on production and will notify BLM of test results.

RECEIVED  
OCT 24 1994  
OIL CON. DIV.  
DIST. 3

070 FARMINGTON, NM

94 OCT 18 AM 11:15

RECEIVED  
BLM

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

Signed

Lester Woolley

Title

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date

OCT 20 1994

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

\*See instruction on Reverse Side

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 recomplete a well in a Federal Reserve.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

RECEIVED  
21 M MAIL ROOM  
OCT 16 PM 3:21  
070 FARMINGTON, NM

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

A.P.A. Development, Inc.

3. Address and Telephone No

P.O. Box 215, Cortez, CO 81321 (970)565-2458

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

1450' FSL & 1980' FWL Sec. 26 T32N R17W

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

8. Well Name and No.

"P" # 19

9. API Well No.

300452672800S1

10. Field and Pool, or Exploratory Area

Many Rocks

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

☐ 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.)

Plan to plug well as follows:

1. Equalize cement plug from 1818' - 1630'.
2. Pump inhibited fresh water from 1630' to 150'.
3. Equalize cement plug from 150' to surface.
4. Clean and remediate location, erect dry hole marker.

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

Signed Late Woolley

Title Field Supervisor

Date 10/11/95

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

Date

APPROVED

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

NMOCD

DISTRICT MANAGER



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

5. Lease Designation and Serial No.

14206003540

6. If Indian, Allottee or Tribe Name

NAVAJO TRIBAL

7. If Unit or CA, Agreement Designation

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

APA DEVELOPMENT INC

3. Address and Telephone No.

PO Box 1093 Shiprock NM 87420

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

No 19 NAVAJO P 1450 FSL + 1880 FWL  
Sec 26 Lease 1420600-3540 T32N, R17W

8. Well Name and No.

NO 19 NAVAJO P.

9. API Well No.

3004526720

10. Field and Pool, or Exploratory Area

MANY ROCKS

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  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☒ Conversion to Injection  
☐ Dispose Water

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.)

NO 19 IS IN LINE of IN section well plan to  
use as IN section well - within 12 mo.

RECEIVED  
JUN - 8 1997

OIL CON. DIV.  
DIST. 3

97 JUN - 2 PM 3:01  
OIL CON. DIV., NM

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

Signed William C. Spencer Title Pres

Date 6-1-87

(This space for Federal or State office use)

Approved by /S/ Duane W. Spencer

Title

Date

JUN - 4 1997

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 Instruction on Reverse Side

NMCO