

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

ch
BMT
5/2
of

OIL CONSERVATION DIVISION

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

30-015-27679

API NO. (assigned by OCD on New Wells)

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.
B-10679

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

2. Name of Operator

FORTSON OIL COMPANY

3. Address of Operator

301 COMMERCE ST., STE. 3301, FORT WORTH, TEXAS 76102

7. Lease Name or Unit Agreement Name

POKER LAKE UNIT

8. Well No.
84

9. Pool name or Wildcat

POKER LAKE DELAWARE

4. Well Location

Unit Letter G : 1980 Feet From The NORTH Line and 1980 Feet From The EAST Line

Section 36 Township 24-S Range 30-E NMPM EDDY County

10. Proposed Depth

8000'

11. Formation

DELAWARE

12. Rotary or C.T.

ROTARY

13. Elevations (Show whether DF, RT, GR, etc.)

14. Kind & Status Plug. Bond
BLANKET

15. Drilling Contractor
TO BE SELECTED

16. Approx. Date Work will start

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP CIRCULATE
17.50"	13.375"	48-60#	700'	650	
1100"	8.625"	24-32#	4100'	1300	500
7.875"	5.50"	15.5-20#	8000"	2 STAGE 1000	600' ABOVE PAY

Operator proposes to drill this well to a depth sufficient to test the Delaware.
If productive, 5.5" casing will be set to TD. If non-productive, the well be
plugged in a manner consistent with State regulations and according to prudent
engineering practice.

A well location & acreage dedication plat & BOP sketches are attached.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 3/28/94
UNLESS DRILLING UNDERWAY

Posted 10-1-10-1-93

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. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE Joe Igo TITLE Agent DATE 9/21/93
TYPE OR PRINT NAME Joe Igo TELEPHONE NO. 520-4347

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE SEP 28 1993

CONDITIONS OF APPROVAL, IF ANY:

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

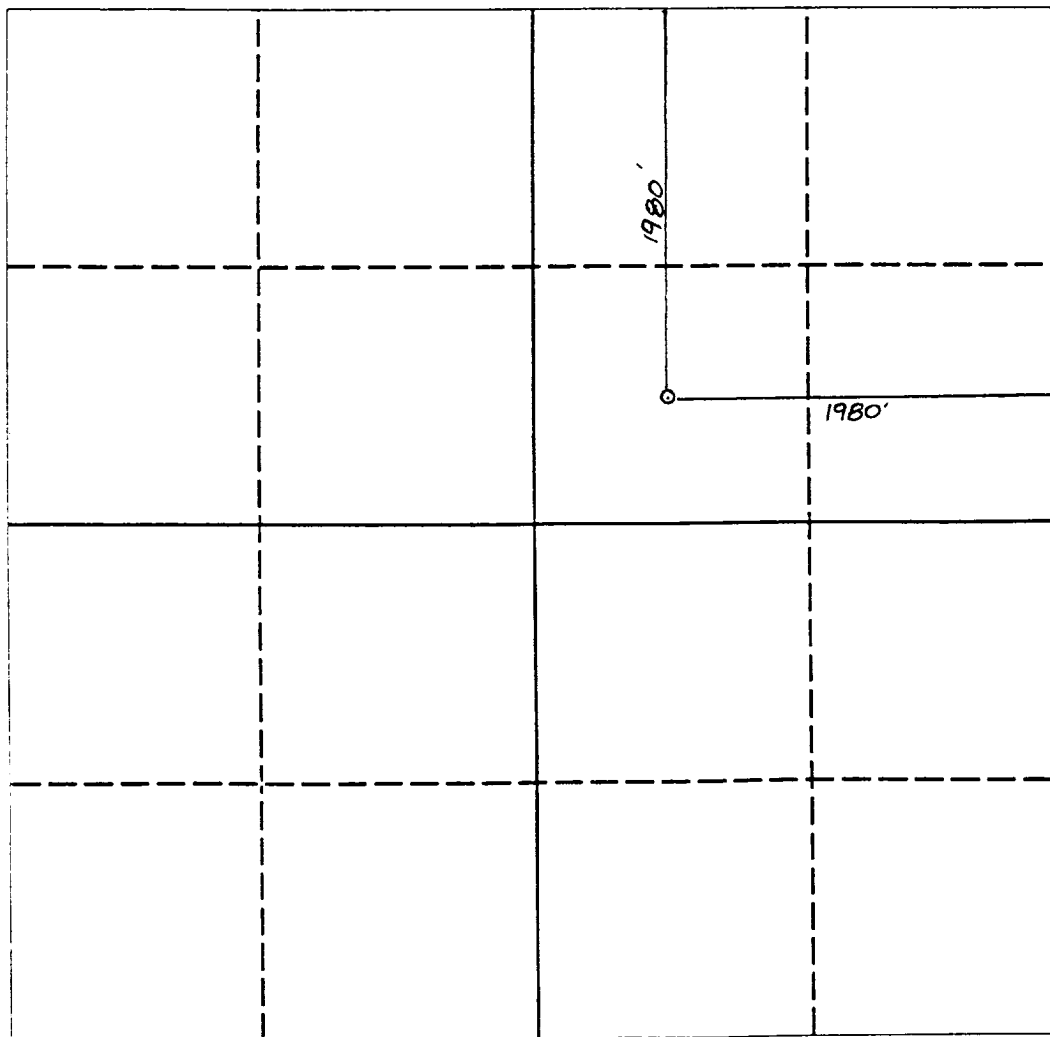
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator FORTSON OIL COMPANY			Lease POKER LAKE UNIT		Well No. 84
Unit Letter G	Section 36	Township 24 SOUTH	Range 30 EAST	County EDDY COUNTY, NM	
Actual Footage Location of Well: 1980 feet from the NORTH line and 1980 feet from the EAST line					
Ground level Elev. 3447.	Producing Formation		Pool	Dedicated Acreage: Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?
☐ Yes ☐ No If answer is "yes" type of consolidation _____
If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____
No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature
J. W. IGO

Printed Name

Position
Area Superintendent
Company
FORTSON OIL COMPANY

Date
9/24/93

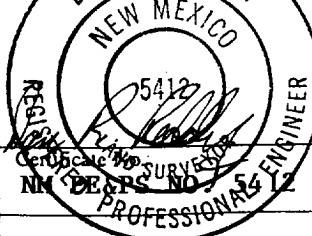
SURVEYOR CERTIFICATION

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

Date Surveyed

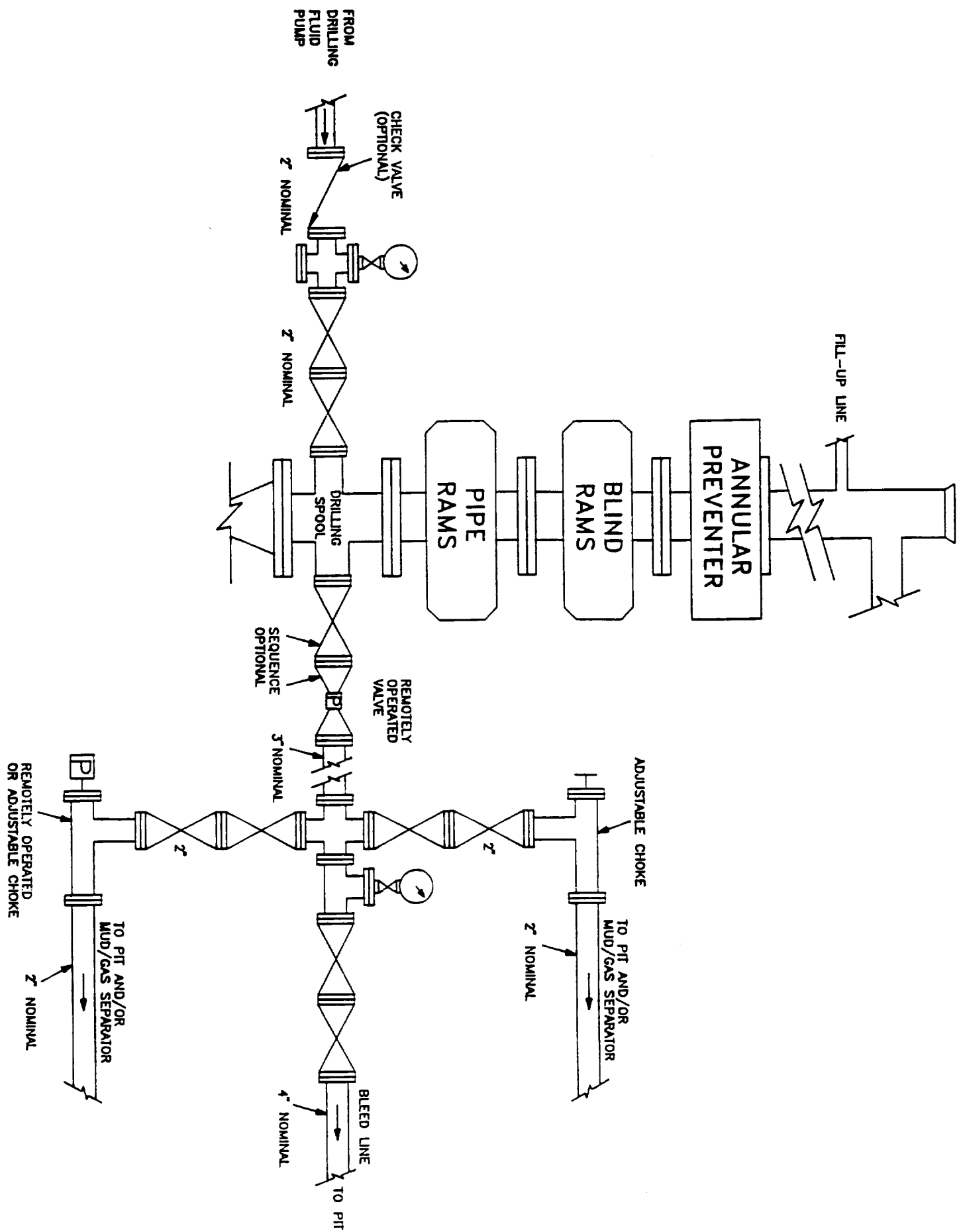
SEPTEMBER 18, 1993

Signature & Seal of Professional Surveyor

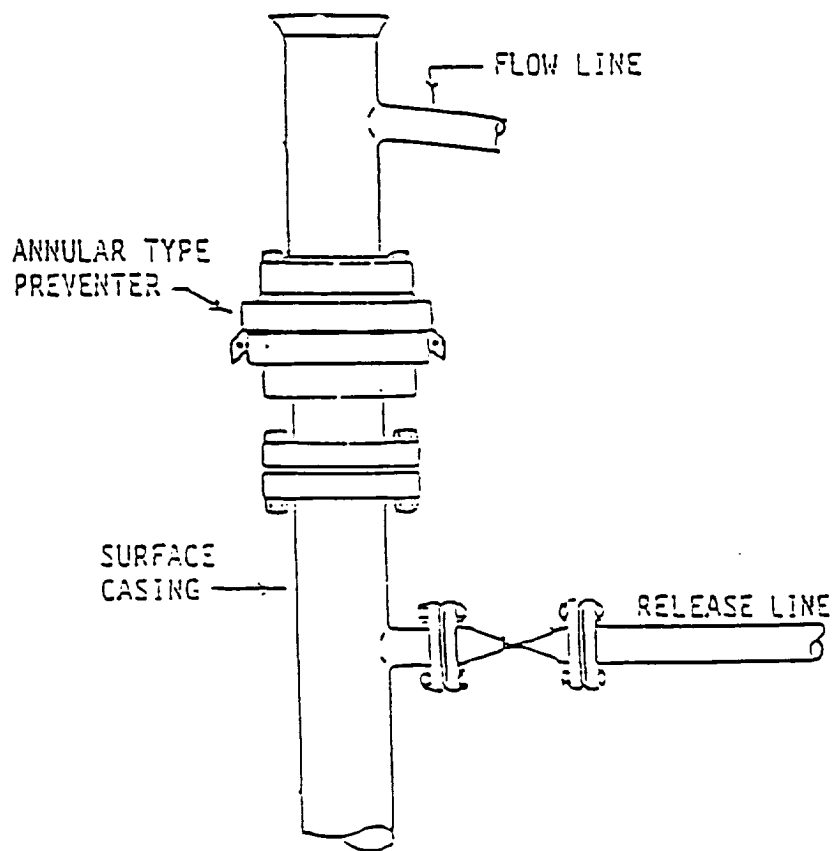


0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0

PROPOSED 3-M BOPE AI CHOKE ARRANGEMENT



13 3/8 CASING



1500 PSI WORKING PRESSURE

IN USE WHILE DRILLING BELOW
SURFACE CASING