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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease  
STATE ☐ FEE ☒

5. State Oil & Gas Lease No.

**API 30-039-21201**

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name <b>Florencio Montoya</b>
2. Name of Operator <b>C.S.T. ENTERPRISES, INC.</b>		9. Well No. <b>Rita 1</b>
3. Address of Operator <b>Box 1200 Farmington, New Mexico 87401</b>		10. Field and Pool, or Wildcat <b>Wildcat</b>
4. Location of Well UNIT LETTER <b>J</b> LOCATED <b>1650</b> FEET FROM THE <b>East</b> LINE AND <b>2310</b> FEET FROM THE <b>South</b> LINE OF SEC. <b>4</b> TWP. <b>22N</b> RGE. <b>3E</b> NMPM		12. County <b>Rio Arriba</b>
19. Proposed Depth <b>1500'</b>		19A. Formation <b>Entrada</b>
20. Rotary or C.T. <b>Rotary</b>		
21. Elevations (Show whether DF, RT, etc.) <b>6719' Grd. level</b>	21A. Kind & Status Plug. Bond <b>Blanket Bond Good</b>	21B. Drilling Contractor <b>John R. Tols Drlg. Ctr.</b>
22. Approx. Date Work will start <b>May 1, 1976</b>		

23.

PROPOSED CASING AND CEMENT PROGRAM

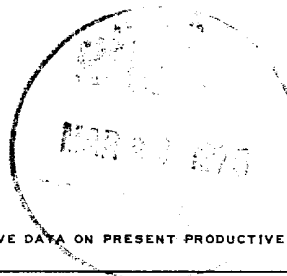
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
9"	7"	20 lbs.	100'	25	

Plan to drill 9" hole to 100' - set & cement 7" surface casing circulated to surface, then drill ahead to the Entrada sand with 6 1/4" bit. Test same if productive. Complete well and set pumping equipment.

Plan to use 7" single Ram. 3000/b test Blowout preventer.

APPROVAL VALID  
FOR 90 DAYS  
DATE ISSUED,

EXPIRES July 2, 1976



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.

Signed John R. Tols Title Secretary Treasurer Date 3/29/76

(This space for State Use)

APPROVED BY AR Kendrick TITLE SUPERVISOR DIST. #0 DATE APR 2 1976

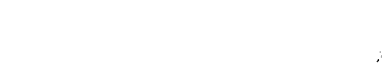
CONDITIONS OF APPROVAL, IF ANY:

1. Name of the person or organization  
 2. Address  
 3. City  
 4. State  
 5. Zip



6. Date  
 7. Time

8. Name of the person or organization  
 9. Address



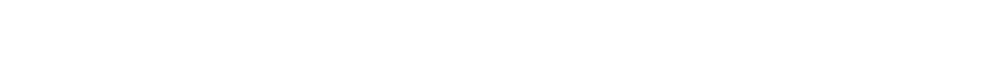
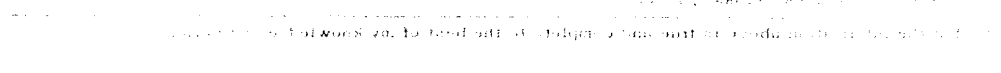
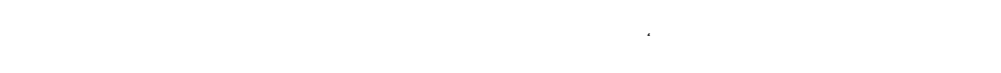
NEW METHOD OF CONSERVATION OF WILDLIFE

1. Name of the person or organization  
 2. Address  
 3. City  
 4. State  
 5. Zip



6. Date  
 7. Time

8. Name of the person or organization  
 9. Address



NEW METHOD OF CONSERVATION OF WILDLIFE

1. Name of the person or organization  
 2. Address  
 3. City  
 4. State  
 5. Zip



6. Date  
 7. Time

8. Name of the person or organization  
 9. Address



NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

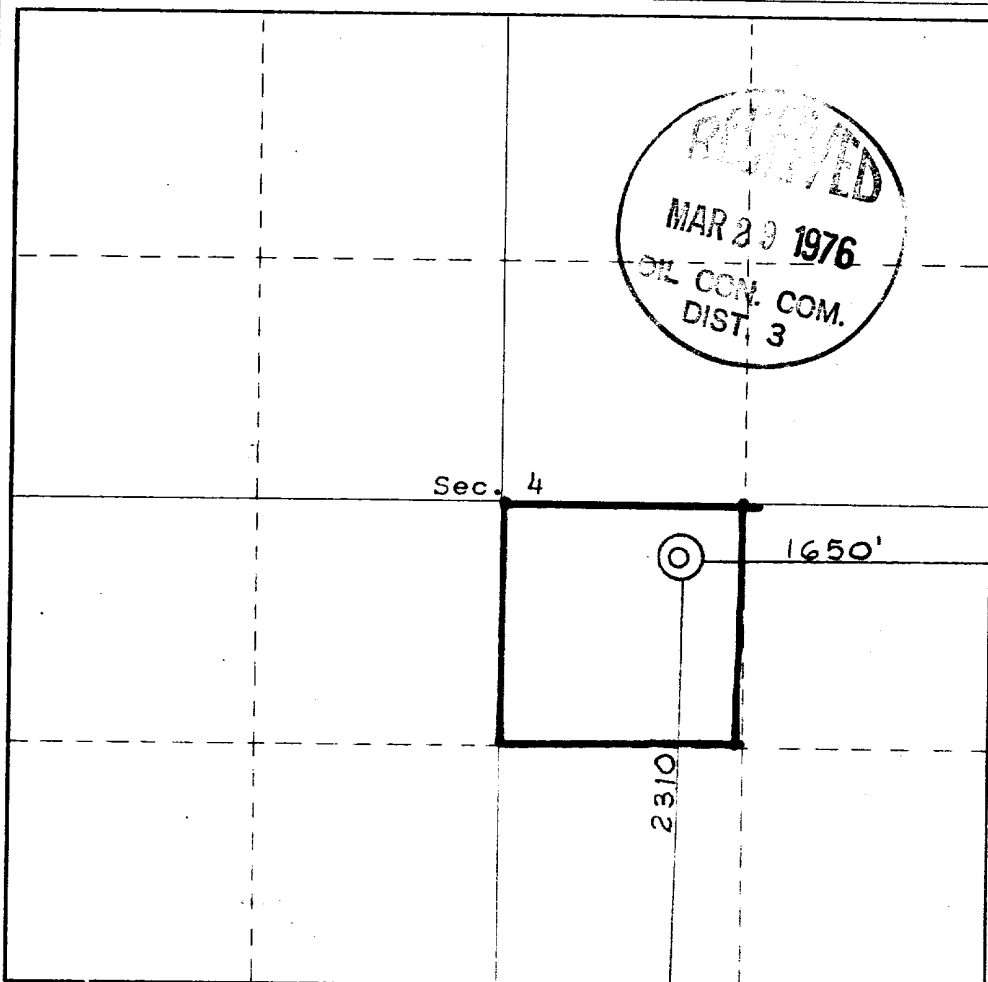
Operator <b>C. S. T. ENTERPRISES</b>			Lease <b>RITA</b>		Well No. <b>1</b>
Unit Letter <b>J</b>	Section <b>4</b>	Township <b>22 NORTH</b>	Range <b>3 EAST</b>	County <b>RIO ARriba</b>	
Actual Well Location of Well: <b>2310</b> feet from the <b>SOUTH</b> line and <b>1650</b> feet from the <b>EAST</b> line					
Ground Level Elev. <b>6719</b>	Producing Formation <b>ENTRADA</b>	Pool <b>WILDCAT</b>		Dedicated Acreage: <b>40</b> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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.

Name John R. Toles  
Position Secretary Treasurer  
Company C. S. T. Enterprises Inc.  
Date 3/29/76

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 17 February, 1976  
Registered Professional Engineer and of State Survey James P. Leese  
Certificate No. 1463

