

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101

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

APPLICATION FOR PERMIT TO DRILL, DEEPEN,
OR PLUG BACK

RECEIVED
AUG 17 1990

API NO. (assigned by OCD on new well
36-039-2488)

5. Indicate Type of Lease
FEE

6. State Oil & Gas Lease No.

1a. Type of Work
DRILL

b. Type of Well
GAS

OIL CON. DIV.
DIST. 3

SINGLE ZONE

7. Lease Name or Unit Agreement Na.
SAN JUAN 27-5 UNIT

2. Name of Operator
MERIDIAN OIL INC.

8. Well No.
307

w/320

3. Address of Operator
PO Box 4289, Farmington, NM 87499

9. Pool Name or Wildcat
BASIN FRUITLAND COAL

4. Well Location
Unit letter L 1605' FSL 880' FWL
Section 13 T27N R05W NMPM RIO ARRIBA COUNTY

10. Proposed Depth
3439'

11. Formation 12. Rotary or C.T.
FRUITLAND COAL Rotary

13. Elevation
6611' GL

14. Bond Type
statewide

15. Drill. Contractor

16. Est. Start Date
upon approval

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE HOLE	SIZE CASING	WT. PER FT.	SET. DEPTH	SKS OF CEMENT	EST. TOP
12 1/4"	8 5/8"	24.0#	200 ft.	248 cu.ft.	circ surface
7 7/8"	5 1/2"	15.5#	3439 ft.	1200 cu.ft.	circ surface

The Fruitland Coal formation will be completed.
A minimum 2000 psi working pressure double gate blowout preventer
equipped with blind and pipe rams will be used for blow out prevention
on this well. This gas is dedicated.
The W/2 of Sec 13 is dedicated to this well.

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

SIGNATURE *[Signature]* TITLE Reg. Drilling Engr. DATE *8/10/90*

(This space for State Use)

APPROVED BY *[Signature]* TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE *AUG 21 1990*
Conditions of approval, if any:

APPROVAL EXPIRES *2-21-91*
UNLESS DRILLING IS COMMENCED.
SPUD NOTICE MUST BE SUBMITTED
WITHIN 10 DAYS.

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. Denver 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 <u>El Paso Natural Gas</u>		Lease <u>San Juan 27-5 Unit</u>		(Fee)	Well No. <u>307</u>
Unit Letter <u>L</u>	Section <u>13</u>	Township <u>27 North</u>	Range <u>5 West</u>	County <u>NMPM</u>	<u>Rio Arriba</u>
Actual Footage Location of Well: <u>1605</u> feet from the <u>South</u> line and <u>880</u> feet from the <u>West</u> line					
Ground level Elev. <u>6611'</u>	Producing Formation <u>Fruitland Coal</u>		Pool <u>Basin</u>	Dedicated Acreage: <u>320</u> Acres	

- Outline the acreage dedicated to the subject well by colored pencil or ink 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 unitization
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, force-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 herein is true and complete to the best of my knowledge and belief.

Peggy Bradfield
Signature

Peggy Bradfield
Printed Name

Regulatory Affairs
Position

El Paso Natural Gas
Company

8-10-90
Date

8-10-90
Date

SURVEYOR CERTIFICATION

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

8-1-90

Neale
Date Surveyed

Neale
Signature

Neale
Printed Name

Neale
Position

Neale
Company

Neale
Date

Neale
Signature

Neale
Printed Name

Neale
Position

Neale
Company

Neale
Date

Neale
Signature

Neale
Printed Name

Neale
Position

Neale
Company

Neale
Date