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LAND OFFICE	
OPERATOR	

5A. Indicate Type of Lease STATE ☐ FEE ☒
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name Harris
9. Well No. #3
10. Field and Pool, or Wildcat Gladiola Miss.
17. County Lea

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL ☐ DEEPEN ☐ PLUG BACK ☒		2. Unit Agreement Name
b. Type of Well OIL WELL ☒ GAS WELL ☐ X OTHER Re-Enter SINGLE ZONE ☐ MULTIPLE ZONE ☐		8. Farm or Lease Name Harris
2. Name of Operator Texas Resources Group, Inc.		9. Well No. #3
3. Address of Operator 5944 Luther Lane, Dallas, Texas 75225		10. Field and Pool, or Wildcat Gladiola Miss.
4. Location of Well LAST LETTER <u>E</u> LOCATED 1980 FEET FROM THE <u>North</u> LINE AND 600 FEET FROM THE <u>West</u> LINE OF SEC. 8 TWP. 12 RGE. 38-E N.M.P.M.		17. County Lea
19. Proposed Depth 11,600'		19A. Formation Miss.
20. History or C.T. Workover Rig		
21. Elevations (Show whether D.F., H.J., etc.) S.L. 3867	21A. Kind & Status Plug. bond Blanket	21B. Drilling Contractor Cobra Drilling
22. Approx. Date Work will start 6-18-82		

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2	13 3/8	42.2	372	400	Circ.
12 1/2	9 5/8	32-36 & 40	4495	2000	Circ.
7 7/8	5 1/2	17 & 20	12,024	500	10,300'

This well was plugged on December 8, 1970 by Gulf Oil Corporation. We plan to Re-Enter same hole, tie back into 5 1/2 at 5106' and perforate and treat the Mississippi at 11,330' to 11,360' and 11,370' to 11,410'.

MUST TEST 5 1/2' CSG TO 560 PSI
AFTER TIE BACK.

OLD WILL WITNESS

void

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 Paul J. Johnson Title Engineer Date 6-11-82

(This space for State Use)

APPROVED BY Jerry S. [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: