

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

OIL CONSERVATION DIVISION

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

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

API NO. (assigned by OCD or New Wells)	30-025-31899
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	V-1618

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work: DRILL <input checked="" type="checkbox"/> RE-ENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>	7. Lease Name or Unit Agreement Name Hat Mesa State
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"/>	
2. Name of Operator Meridian Oil Inc.	8. Well No. 4
3. Address of Operator P.O. Box 51810, Midland, TX 79710-1810	9. Pool name or Wildcat Hat Mesa Delaware
4. Well Location Unit Letter H : 1835 Feet From The North Line and 990 Feet From The East Line	

Section 32 Township 20S Range 33E NMPM Lea County

10. Proposed Depth 8450'	11. Formation Delaware	12. Rotary or C.T. rotary	
13. Elevations (Show whether DF, RT, GR, etc.) 3621.1	14. Kind & Status Plug. Bond statewide	15. Drilling Contractor n/a	16. Approx. Date Work will start upon approval

17. 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"	48#	400'	420 sxs	surf.
12 1/4"	8 5/8"	28#	3300'	1450 sxs	surf.
7 7/8"	5 1/2"	17#	8550'	950 sxs	est. top 3000'

DV tool @6000' 2 stage cmt. job

BOP Program: 11"-3M BOP stack to be installed on 8 5/8" csg. and left for remainder of drilling.

Estimated tops: Rustler 1350', Salado 1500', Yates 3200', Delaware 4950'

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 Donna Williams TITLE Production Assistant DATE 1-13-93
TYPE OR PRINT NAME Donna Williams 915-688-6943 TELEPHONE NO.

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON

ASSISTANT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

FEB 24 1993

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator MERIDIAN OIL INC.		Lease HAT MESA STATE		Well No. 4	
Unit Letter H	Section 32	Township 20 SOUTH	Range 33 EAST NMPM	County LEA	
Actual Footage Location of Well: 1835 feet from the NORTH line and 990 feet from the EAST line					
Ground Level Elev. 3621.1'	Producing Formation Delaware	Pool Hat Mesa Delaware		Dedicated Acreage: 40 Acres	
<p>1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.</p> <p>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).</p> <p>3. 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.?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No If answer is "yes" type of consolidation _____</p> <p>If answer is "no" list of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary. _____)</p> <p>No allowable will be assigned to the well unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.</p>					
				OPERATOR CERTIFICATION I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief. Signature Donna Williams Printed Name Production Assistant Position Meridian Oil Inc. Company 1-13-93 Date	
				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 DECEMBER 21, 1992 Signature & Seal of Professional Surveyor Certificate No. JOHN W. WEST, 878 RONALD E. EDSON, 3239 GARY V. JONES, 7977 92-11-1867	