State of New Mexico gy, Minerals and Natural Resources Department

District I
PO Box 1960, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Axtec, NM 87410
District IV

PO Box 20kN, Santa Fe, NM 87504-2088

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088 Form C-101
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

☐ AMENDED REPORT

| APPLIC | ATION | FOR PE | ERMIT T | O DRILI | L, RE-EN | TER, DE | EPEN, | PLUGBAC | K, OR | ADE | A ZONE | | |
|--|---------------------------|-----------------------------|---------------------|----------------------|-----------------------|--|----------------------|----------------------|-------------|---------------------------|-------------|--|--|
| APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACE 1 Operator name and Address | | | | | | | | | | ² OGRID Number | | | |
| ARC() Permia | n | - | | | | | | | | 000990 | | | |
| P.O. Box 1710 |) | | | | | | | | | 3 AP | I Number | | |
| Hobbs, NM 8 | 8240 | | | | | | | | 30-0 | 30-0 30-025-11776 | | | |
| 4 Prop | erty Code | | | | 5 P | roperty Name | | | | 6 1 | Well Number | | |
| 00 | 1537 | | | | | STATE Y | | | <u> </u> | | 8 | | |
| | | | | 7 | Surface L | ocation | | | | | | | |
| UI or lot no. | Section | Township | Range | Lot. Idn | Feet from the | North/South Line | | Feet from the East/V | | line | County | | |
| 11 | 25 | 25S | 37E | | 1980 | | N . | 990 | E | | LEA | | |
| 8 Proposed Bottom Hole Location If Different From Surface | | | | | | | | | | | | | |
| UL or lot no. | Section | Township | Range | Lot. Idn | Feet from th | he North/South Line Feet from | | Feet from the | East/West | line | County | | |
| | 9 Proposed Pool 1 | | | | | | | 10 Proposed P | Pool 2 | | | | |
| Lanal | 12 D | Da #1 | SDS | 12/2R | | | | • | | | | | |
| Langi | C II | 14 1114 | JACX | | | | | | | | | | |
| 11 Work T | ype Code | 12 | Well Type C | ode | 13 Cable/R | otary | 14Lease Type Code | | 15 Gro | 15 Ground Level Elevation | | | |
| | | | 0 | | C | | s | | 3075' DF | | C DE | | |
| 16 Mu | A Itiple | | O 17 Proposed De | epth | 18 Formal | tions 🥎 | 19 Contractor | | | 20 Spud Date | | | |
| | | | | | シストン | SR-WW | | | 214 | | | | |
| 1 | NO | l | 2900-3400 | 21 D | | MATTIX | Decem | NA | | | NA . | | |
| | | | | , | - | and Cement Program Setting Denth Sacks of Cement Estimated TOC | | | | | | | |
| Hole S | ize | Cas | ing Size | Casing w | veight/foot Setting D | | epth Sacks of Cement | | ent | Estimated FOC | | | |
| SEE COMPLI | ETION DA | TED 05 | TED 05/27/59 | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | - | | | | | - | | | | | | |
| | | | | | | | | | | | | | |
| Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone Describe the blowout prevention program, if any. Use additional sheets if necessary | | | | | | | | | | | | | |
| | - | | | | | | | | | | | | |
| TD = 6880' P | | | | | | | | | | | | | |
| PROPOSE TO MATTIX SRQ | SET CIBI WITHIN: | P AND 35' C 2900-3400' I | MT ABOVE | CURRENT AND STIMU | PERFS TO A LATE. | LBANDON JU | JSTIS FU | SSELMAN. PEI | RF LANGL | Æ | | | |
| SET 100" CEMENT PLUE & 5000" Permit Expines & Months From Approval | | | | | | | | | | | | | |
| DATE COMPANY CONTROL C | | | | | | | | | | | | | |
| | | | | | 1201 | | | | | | 4. | | |
| 23 I hereby certif | OIL CONSERVATION DIVISION | | | | | | | | | | | | |
| Signature: |) . []][] | W. 4n | | 6 | Approved by: \$2X10N | | | | | | | | |
| Printed name: K | ELLIE D. | MURRISH | | - <u>-</u> | | Title: Start | | | | | | | |
| | | E ASSISTA | NT | | | Approval Date: DEC 23 1334 Expiration Date: | | | | | | | |
| Date: | | Conditions of Approval: | | | | | | | | | | | |
| 12/20/94 | 1 | | | | | | Attched | | | | | | |



DEC 2 1 1994

OFFICE

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| | AMENDED | REPORT |
|--|---------|--------|
|--|---------|--------|

WELL LOCATION AND ACREAGE DEDICATION PLAT

| API Number | | | | Pool Code | | | | Pool Name | | | | | | | | |
|--|-----------|-------------|-------------|---------------|------------|----------------------------|--------|---------------|--|----------------------|--------------------------------|--|--|-----------------------|--|--|
| 30-025-11776 | | | | | | 37240 LANGLIE MATTIX SRQ | | | | | | | | | | |
| Property Code | | | | | | Pro | ery Na | me | | Well Number | | | | | | |
| 001537 STATE Y | | | | | | | | | | 8 | | | | | | |
| OGRID No. | | | | Operator Name | | | | | | | Elevation | | | | | |
| 000990 ARCO Permi | | | nian 💮 | | | | | | | 3075' DR | | | | | | |
| | | | | | | | 10 | Surface | Loca | tion | | | | | | |
| UI or let no. | Section | ١ | Township | R | ange | Lot. Idn Feet | | Feet from the | | North/South Line | Feet from the | East/W | est line | County | | |
| 11 | 11 25 25S | | | 37E | E | | 1980 | | N | 990 | E | | LEA | | | |
| 11 Bottom Hole Location If Different From Surface | | | | | | | | | | | | | | | | |
| UL or lot no. | Section | , | Township | ownship Range | | Lot. Idn | | Feet from the | | North/South Line | Feet from the | East/West line | | County | | |
| | | | • | | Ü | 1 | | | | | | | | - | | |
| 12 Dedicated Acres | s 13 J | oint o | r Infill | 14Con | solidation | lidation Code 15 Order No. | | | | <u> </u> | | ! | | | | |
| | | | | | | | | | | | | | | | | |
| NO ALLOY | LADI 1 | C 13/ | II I DE | 122 A | GNED | ፐር ፐኒ | IIS C | OMPI E | TION | IINTII AII IN' | TERESTS HAV | /F REE | NCON | ISOI IDATED | | |
| NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEENCONSOLIDATED OR A NONSTANDARD UNIT HAS BEEN APPROVED BY THE DIVISION | | | | | | | | | | | | | | | | |
| | ·*· | | | | 1 | | | - | 7 | | 1 | | CEDT | TEICATION | | |
| | | | | | | | | | | | OPERA | 17 OPERATOR CERTIFICATION 1 hereby certify that the information contained herein is | | | | |
| | | | | | | | | | | | | | | knowledge and belief. | | |
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| | | | | | | | | | 1// | ///////// | | | | | | |
| | | | | | | | | | 1 | | Signature | | / | | | |
| | | | | | | | | | | #8 | KELLIE D. MURRISH Printed Name | | | | | |
| | | | | | - | | | | 1 | | ADMINISTRATIVE ASSISTANT | | | | | |
| | | | | | 1 | | | | } | - | Title | | | | | |
| | | | | | | | | | 7 | | 12/20/94 | | | | | |
| | | | | | | | | <u> </u> | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | Date | | | | | | |
| | | | | | • | | | | × | 18 SURVE | YOR C | ERTI | FICATION | | | |
| | | | | | | | | | | I hereby certify t | hat the w | vell location | on shown on this plat itual surveys made by | | | |
| | | | | | | | | | | me or under my | supervisio | n, and | that the same is true | | | |
| | | | | | | | | | | | and correct to the bes | t of my beliej | f. | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | - | | Date of Survey | | | _ | | |
| | | | | | | | | | | | Signature and Seal of | Professiona | l Surveyer: | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | 1 | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | |
| | | | | | | : | Ц | | Certificate Number | | | | | | | |