District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-8161 Fax:(575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720

District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

District IV 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico **Energy, Minerals and Natural Resources** Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

Form C-101 August 1, 2011

Permit 185898

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				,	L-ENTEN, DEET I	,	,		
	ame and Address						1	2. OGRID Number	
BR	ECK OPERATIN	G CORP						2799	
PO	BOX 911						3	3. API Number	
BR	ECKENRIDGE,	TX 764240911						30-025-41842	
4. Property Co	de	1	5. Property Name				6	B. Well No.	
313	3215		STATE 12					001	
			710	7. S	urface Location			000222	
UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
F	12	19	9S 35E	- 60	2310	N	165	50 W	Lea
				8. Propose	d Bottom Hole Location	on			
	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
UL - Lot	Section				2310		169	50 W	Lea

SCHARB;WOLFCAMP, SOUTHEAST	55650

Additional Well Information

11. Work Type	12. Well Type	13. Cable/Rotary	14. Lease Type	15. Ground Level Elevation
New Well	OIL		State	3763
18. Multiple	17. Proposed Depth	18. Formation	19. Contractor	20. Spud Date
N	11000	Wolfcamp		2/1/2015
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

☑ We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sads of Cement	Estimated TOC
Surf	17.5	13.375	54.5	1775	450	0
Int1	12.25	8.675	32	4150	1900	0
Prod	7.875	5.5	17	11000	1650	4000

Casing/Cement Program: Additional Comments

Page 1	
	22 December 1 December 1 December 2
	77 Pronoged Blowout Program

	22. Froposed Biowout Frevention Frogram							
Type	Working Pressure	Test Pressure	Manufacturer					
Double Ram	3000	3000	Cameron or Schaffer					

23. I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify I have complied with 19.15.14.9 (A) NMAC ⋈ and/or 19.15.14.9 (B) NMAC ⋈, if applicable. Signature:			OIL CONSERVATION DIVISION		
Printed Name:	Name: Electronically filed by Linda Venekamp			Paul Kautz	
Title:	Managerq	Title:	Geologist		
Email Address:	Email Address: lvenekamp@breckop.com			5/12/2014	Expiration Date: 5/12/2016
Date:	5/8/2014	Phone: 254-559-3355	Conditions of App	proval Attached	•

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State of New Mexico **Energy, Minerals and Natural Resources** Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

Form C-102 August 1, 2011

Permit 185898

WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30-025-41842	2. Pool Code 55650	3. Pool Name SCHARB;WOLFCAMP, SOUTHEAST
4. Property Code	5. Property Name	6. Well No.
313215	STATE 12	001
7. OGRID No.	8. Operator Name	9. Elevation
2799	BRECK OPERATING CORP	3763

10. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
F	12	198	35E		2310	N	1650	W	Lea

11. Bottom Hole Location If Different From Surface

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
12. Dedicated Acres 40 00			13. Joint or Infill		14. Consolidation C	ode		15. Order No.	

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location(s) or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.
E-Signed By: Linda Venekamp Title: Managerq Date: 5/8/2014
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 belief.
Surveyed By: Macon McDonald
Date of Survey: 4/23/2014
Certificate Number: 12185

Form APD Comments

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Permit 185898

PERMIT COMMENTS

Operator Name and Address:	API Number:
BRECK OPERATING CORP [2799]	30-025-41842
PO BOX 911	Well:
BRECKENRIDGE, TX 764240911	STATE 12 #001

Created By	Comment	Comment Date
pkautz	Land s/S	5/9/2014

Form APD Conditions

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State of New Mexico **Energy, Minerals and Natural Resources** Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

Permit 185898

PERMIT CONDITIONS OF APPROVAL

Operator Name and Address:	API Number:
BRECK OPERATING CORP [2799]	30-025-41842
PO BOX 911	Well:
BRECKENRIDGE, TX 764240911	STATE 12 #001

OCD Reviewer	Condition
pkautz	Once the well is spud, to prevent ground water contamination through whole or partial conduits from the surface, the operator shall drill without interruption through the fresh water zone or zones and shall immediately set in cement the water protection string
pkautz	If using a pit for drilling and completion operations, must have an approved pit from prior to spudding the well.
pkautz	1) SURFACE & INTERNEMIATE CASING - Cement must circulate to surface 2) PRODUCTION CASING - Cement must tie back into intermediate casing
pkautz	Surface casing must be set 25' below top of Rustler Anhydrite in order to seal off protectable water