

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)

30-021-20235

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL WELL ☐

GAS WELL ☒

OTHER CO2

SINGLE ZONE ☒

MULTIPLE ZONE ☐

2. Name of Operator

Amoco Production Company

8. Well No.

2033-191G

3. Address of operator

P.O. Box 606 Clayton N. Mex. 88415

9. Pool name or Wildcat

Tubb

4. Well Location

Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line

Section 19 Township T 20 N Range R 33 E NMPM Harding County

10. Proposed Depth

2510

11. Formation

Tubb

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

5050

14. Kind & Status Plug. Bond

Blanket On File

15. Drilling Contractor

N/A

16. Approx. Date Work well start

05-01-93

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4"	8 5/8" Steel	24#	700'	Circulate to Surface	Surface
7 7/8"	4 1/2" Fiberglass	2000# psi	2435'	Circulate to Surface	Surface

Propose to Drill & Equip well in the Tubb formation. To reach total depth, a 3 7/8" open hole will be air drilled approximately 75' below 4 1/2" casing.

Mud Program: 0-700' gel-Spud Mud
700-2200' Starch/Gel
2200-2325 Air

BOP Program Attached

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

Joy Filkins

TITLE

Administrative Secretary

DATE

3/18/93

TYPE OR PRINT NAME

Joy Filkins

TELEPHONE NO. (713) 556-3613

(This space for State Use)

APPROVED BY

[Signature]

TITLE

DISTRICT SUPERVISOR

DATE

12-31-93

CONDITIONS OF APPROVAL, IF ANY:

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

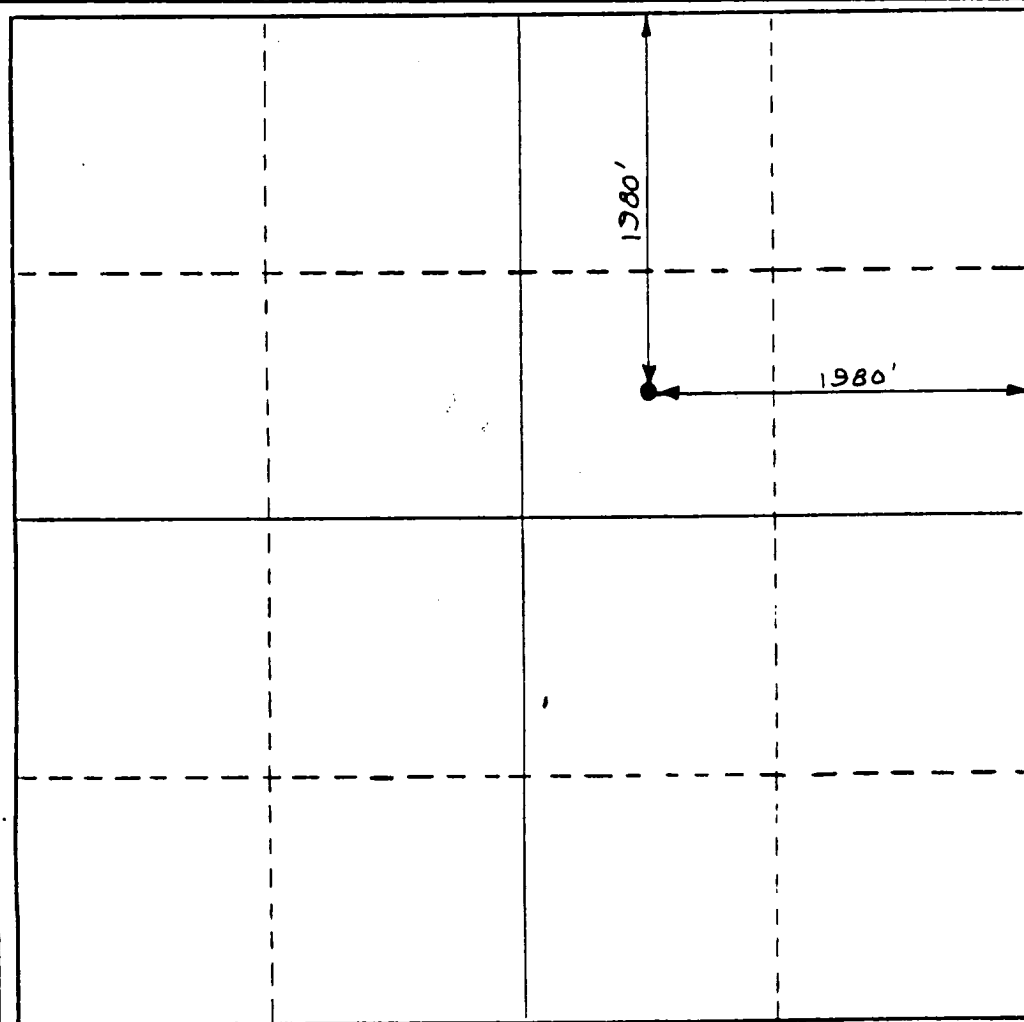
Operator AMOCO PRODUCTION COMPANY			Lease		Well No. 2033191G
Unit Letter G	Section 19	Township T 20 N	Range R 33 E	County HARDING	
Actual Footage Location of Well: 1980 feet from the NORTH line and 1980 feet from the EAST line					
Ground Level Elev. 5050	Producing Formation		Pool		Dedicated Acreage: <div style="text-align: right;">Acres</div>

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
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).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

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, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

B. E. ...
 Name _____
 Position **Field Foreman**
 Company **Amoco - Clayton**
 Date **3/1/93**

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.

FEB. 9, 1993

Date Surveyed

Registered Professional Engineer
and/or Land Surveyor

Joe Shields
 Certificate No. _____
N.M.L.S. NO. 5103

