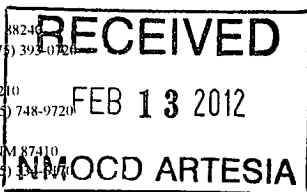


District I
1625 N French Dr Hobbs, NM 88240
Phone (575) 393-6161 Fax (575) 393-0720
District II
811 S First St., Artesia, NM 88210
Phone (575) 748-1283 Fax (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone (505) 334-6178 Fax (505) 334-6179
District IV
1220 S St Francis Dr Santa Fe, NM 87505
Phone (505) 476-3460 Fax (505) 476-3462



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

Form C-101
Revised December 16, 2011

Permit

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address THREE RIVERS OPERATING COMPANY, LLC 1122 S. CAPITAL OF TX HWY., #325 AUSTIN, TX 78746		² OGRID Number 272295
		³ API Number 30-015-33562
⁴ Property Code 300638	⁵ Property Name PINE SPRING 2 STATE	⁶ Well No 1

⁷ Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
E	2	26S	25E		1980	N	810	W	EDDY

⁸ Pool Information

WHITE CITY; WOLFCAMP, SOUTH (GAS)	97592
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Additional Well Information

⁹ Work Type PB-RC	¹⁰ Well Type O/G	¹¹ Cable/Rotary R	¹² Lease Type S	¹³ Ground Level Elevation 3584'
¹⁴ Multiple N	¹⁵ Proposed Depth 9755' PBDT	¹⁶ Formation WOLFCAMP	¹⁷ Contractor N/A	¹⁸ Spud Date
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

¹⁹ Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
H40	17 1/2"	13 3/8"	48	403'	450	SURFACE
N80	12 1/4"	9 5/8"	40	5227'	3635	SURFACE
P110	8 7/8"	5 1/2"	20	11900'	1455	SURFACE

Casing/Cement Program: Additional Comments

--

Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
HYDRAULIC	5000#	5000#	N/A

I hereby certify that the information given above is true and complete to the best of my knowledge and belief I further certify that the drilling pit will be constructed according to NMOC D guidelines <input type="checkbox"/> , a general permit <input type="checkbox"/> , or an (attached) alternative OCD-approved plan <input type="checkbox"/> .		OIL CONSERVATION DIVISION Approved By	
Signature			
Printed name TOM STRATTON		Title	
Title OPERATIONS MANAGER		Approved Date	Expiration Date
E-mail Address tstratton@3rnr.com		Conditions of Approval Attached	
Date 02/08/2012	Phone 512-706-9849		

Accepted for record
NMOC D

Submit Form C-107A; Application For Downhole Commingling
To Santa Fe OCD. TCS 2/14/2012

RECEIVED

District I
1625 N French Dr Hobbs, NM 88240
Phone (575) 398-6161 Fax (575) 393-0730

District II
811 S First St Artesia NM 88210
Phone (575) 744-0011 Fax (505) 476-9770

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

District IV
1220 S St Francis Dr. Santa Fe NM 87505
Phone (505) 476-3460 Fax (505) 476-3462

FEB 13 2012

NM OIL CONSERVATION DIVISION

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102

Revised August 1, 2011

Submit one copy to appropriate

District Office

☐ AMENDED REPORT**WELL LOCATION AND ACREAGE DEDICATION PLAT**

¹ API Number 30-015-33562	² Pool Code 97592	³ Pool Name WHITE CITY; WOLFCAMP, SOUTH (GAS)
⁴ Property Code	⁵ Property Name PINE SPRINGS 2 STATE	⁶ Well Number 1
⁷ OGRID No. 272295	⁸ Operator Name THREE RIVERS OPERATING COMPANY, LLC	⁹ Elevation 3584' GL

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	2	26S	25E		1980	NORTH	810	WEST	EDDY

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

¹² Dedicated Acres	¹³ Joint or Infill	¹⁴ Consolidation Code	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.

	¹⁷ 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 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.
	Signature: <u>[Signature]</u> Date: <u>02/08/2012</u> Printed Name: <u>TOM STRATTON</u> E-mail Address: <u>tstratton@3rnr.com</u>
	¹⁸ 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.

Date of Survey
Signature and Seal of Professional Surveyor
Certificate Number

Submit 1 Copy To Appropriate District
Office
District I - (575) 393-6161
1625 N French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S St Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised August 1, 2011

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.	30-015-33562
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name PINE SPRINGS 2 STATE	
8. Well Number	1
9. OGRID Number	272295
10. Pool name or Wildcat WHITE CITY; WOLFCAMP, SOUTH (GAS)	

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH
PROPOSALS)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other

2. Name of Operator THREE RIVERS OPERATING COMPANY, LLC

3. Address of Operator 1122 S. CAPITAL OF TX HWY., #325
AUSTIN, TX 78746

4. Well Location
Unit Letter E : 1980 feet from the NORTH line and 810 feet from the WEST line
Section 2 Township 26S Range 25E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc)
3584' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: DEEPEN & COMMINGLE ☒

OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Well is currently completed in Bone Spring perms -

Avalon 5616' - 5904'

1st Bone Spring 6063' - 6310' - tested 100% sw

1st Bone Spring 6657' - 6851' - tested 100% sw

2nd Bone Spring 7452' - 7528'

3rd Bone Spring 8002' - 8234'

Proposal - cement squeeze 1st Bone Spring

drill out CIBP @ 9760' & commingle Wolfcamp with Bone Spring



Spud Date:

02/10/2012

Rig Release Date:

02/20/2012

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

SIGNATURE

TITLE OPERATIONS MANAGER

DATE 02/08/2012

Type or print name TOM STRATTON

E-mail address: tstratton@3rnrr.com

PHONE: 512-706-9849

For State Use Only

APPROVED BY:

TITLE

DATE

Conditions of Approval (if any):

Accepted for record

NMOCD TCS 2/14/2012