

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

ARTESIA, OFFICE

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

API NO. (assigned by OCD on New Wells)

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

B-3105

7. Lease Name or Unit Agreement Name

KERSEY STATE

8. Well No.

1

9. Pool name or Wildcat

6BR-Jackson SR-17-G-SF

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 ☐

SINGLE ZONE ☐

MULTIPLE ZONE ☐

2. Name of Operator

Ray Westall

3. Address of Operator

P.O. Box 4, Loco Hills Nm 88255

4. Well Location

Unit Letter B : 660 Feet From The NORTH Line and 1980 Feet From The EAST Line

Section 16

Township 17S

Range 31E

NMPM

Eddy

County

10. Proposed Depth

3780

11. Formation

SAN ANTONIO

12. Rotary or C.T.

RT.

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

3835 SL

14. Kind & Status Plug Bond

Blanket

15. Drilling Contractor

Unknown

16. Approx. Date Work will start

3/1/89

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
10"	8 5/8"	28 #	635	50 SXS	
8"	7"	20 #	3138	100 SXS	
6 1/4"	4 1/2"		3780	75 SXS	sufficient to tie into 7" casing

The 8 5/8" & 7" casing are currently in well

We propose to Deepen well from 3678 to 3780 (102 ft)

Run 4 1/2" casing and cement w/ sufficient amount to tie into the 7" casing. Perforate and stimulate as necessary to establish production

Former Kersey & Co. - W.R. St. #2

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPTEN 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

TITLE

GEOLOGIST

DATE

2/27/89

TYPE OR PRINT NAME

RANDALL HARRIS

TELEPHONE NO. 677-2370

(This space for State Use)

Original Signed By
Mike Williams

FEB 28 1989

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Submit to Appropriate
District Office
State Lease - 4 copies
Federal Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89
RECEIVED

OIL CONSERVATION DIVISION

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

FEB 27 '89

STRICT I
P.O. Box 1980, Hobbs, NM 88240

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

STRICT III
P.O. Box 87410, Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

O. C. D.
ARTESIA, OFFICE

Operator Ray Westall			Lease Kersey State		Well No. 1
Unit Letter B	Section 16	Township 17S	Range 31E	County Eddy	NMPM
Actual Footage Location of Well: feet from the 660 NORTH line and 1980 feet from the EAST line					
Ground level Elev.	Producing Formation SAN ANDRES		Pool GBR Jackson	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.

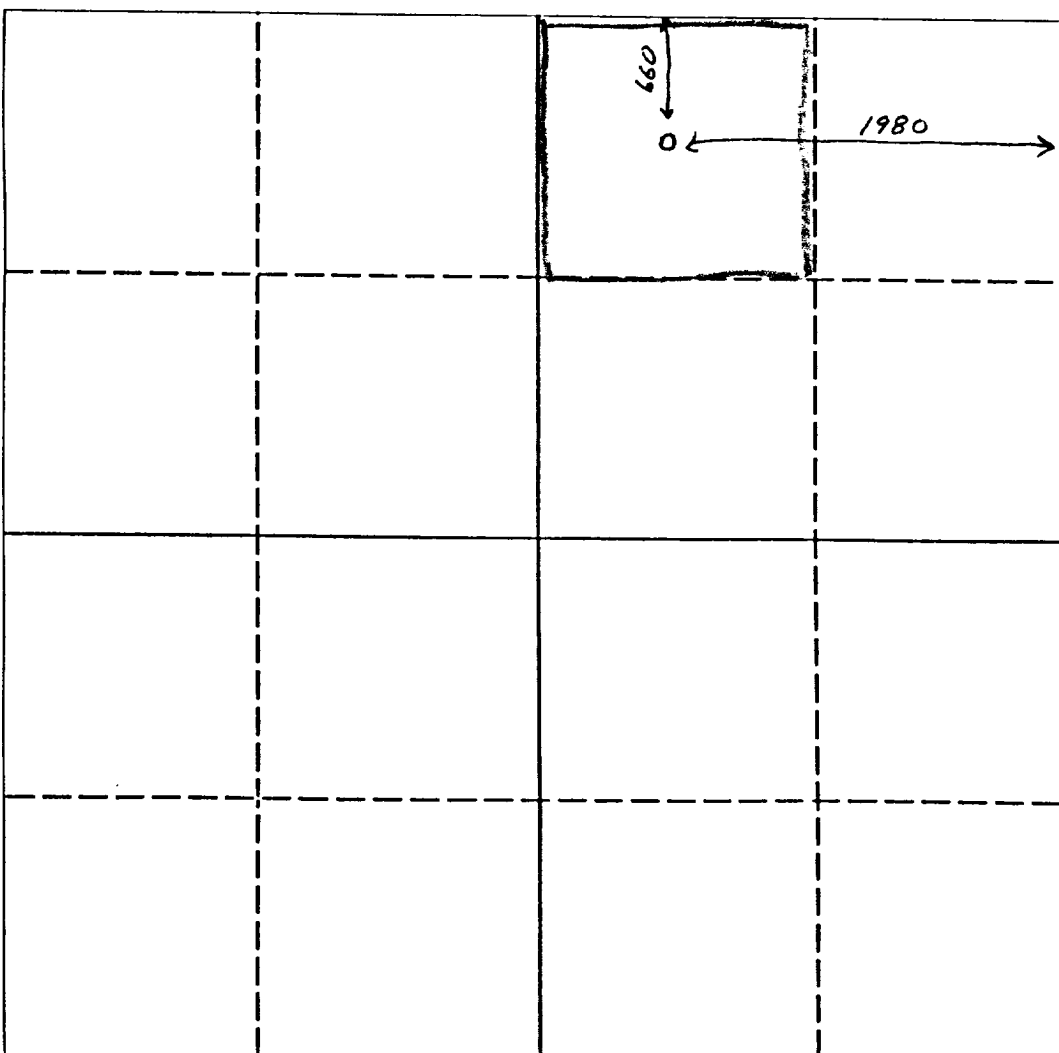
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. If more than one lease of different ownership is dedicated to the well, have the interest 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 interest, 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.

Signature

Printed Name

Position

Company

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

Signature & Seal of
Professional Surveyor

Certificate No.

330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600