

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

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

OIL CONSERVATION DIVISION

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

MAR 13 1992

O. C. D.

API NO. (assigned by OCD on New Wells)

30-015- 26966

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 ☐

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

Pardue Martin

8. Well No.

2

9. Pool name or Wildcat

East Loving Delaware

4. Well Location

Unit Letter L

: 1660

Feet From The

South

Line and

340

Feet From The

West

Line

Section 2

Township 23S

Range 28E

NMPM

Eddy

County

10. Proposed Depth
6350'

11. Formation
Delaware

12. Rotary or C.T.
Rotary

13. Elevations (Show whether DF, RT, GR, etc.)
2988.8' GR

14. Kind & Status Plug. Bond
Blanket

15. Drilling Contractor
Grace

16. Approx. Date Work will start
3-16-92

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"	24#	400'	300 sx	Surface
7 7/8"	4 1/2"	11.6#	6350'	700 sx	2400'

Part ID-1
3-30-92
Wm L & H API

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 9/3/92
UNLESS DRILLING UNDERWAY

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 Brad D Burks TITLE Agent DATE 3-12-92

TYPE OR PRINT NAME Brad D. Burks 918-582-3855 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE MAR 16 1992

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT I

P.O. Box 1990, Hobbs, NM 88240

DISTRICT II

P.O. Drawer 55, Arizola, NM 88310

DISTRICT III

1000 Rio Brasas Rd., Artes, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

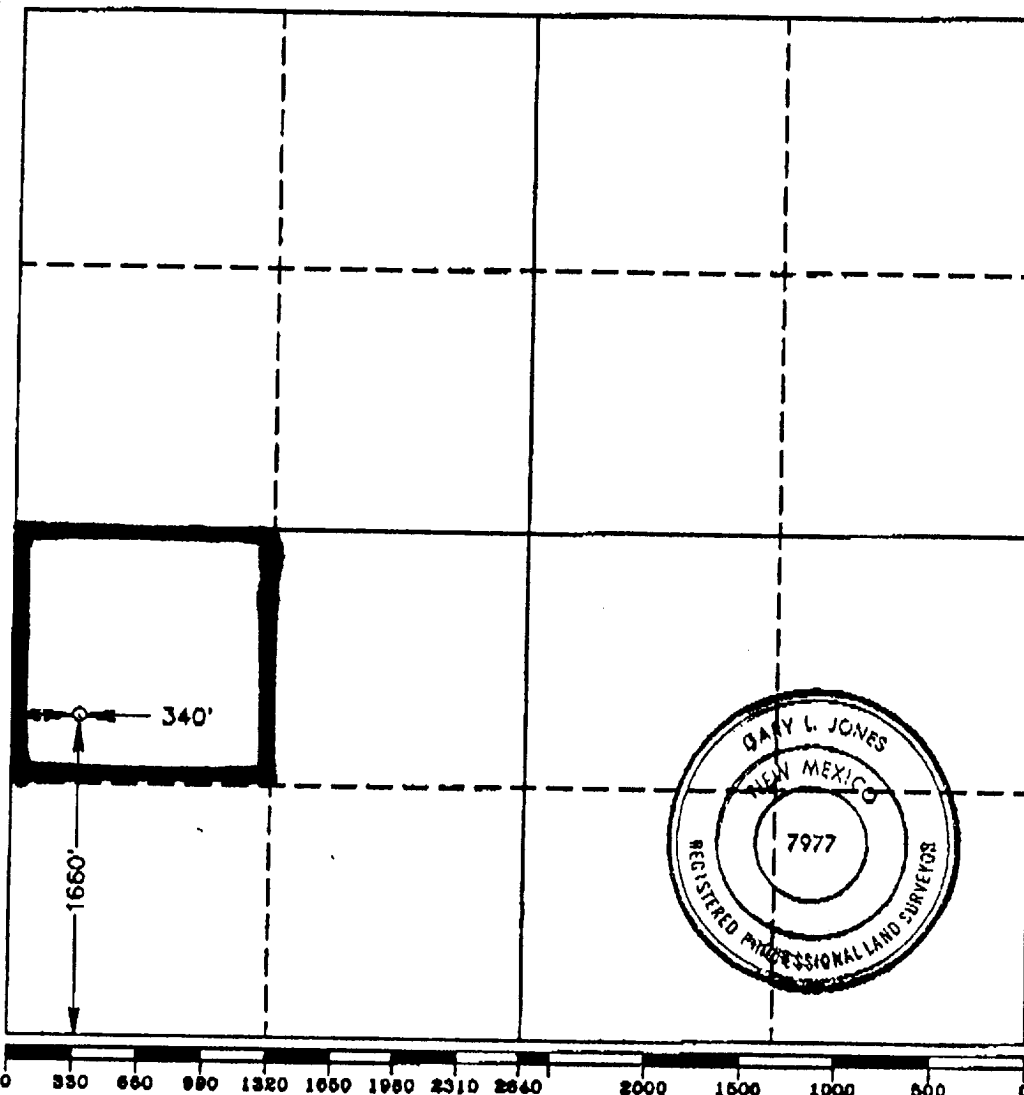
All Distances must be from the outer boundaries of the section

Operator BIRD CREEK RESOURCES, INC.		Lease PARDUE-MARTIN		Well No. 2
Unit Letter L	Section 2	Township 23 SOUTH	Range 28 EAST	County EDDY
Actual Footage Location of Well: 1660 feet from the SOUTH line and 340 feet from the WEST line				
Ground Level Elev. 2988.8'	Producing Formation Delaware	Pool East Loving Delaware	Dedicated Acreage: 40 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hand-drawn marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- 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 of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary).

No allowable will be assigned to the well unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature: *[Signature]*
Printed Name: **B.C. Kimmel**
Position: _____
Agent: _____
Company: **Bird Creek Resources, Inc.**
Date: **March 12, 1992**

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual survey 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: **MARCH 11, 1992**
Signature & Seal of Professional Surveyor: *[Signature]*
Certificate No. **JOHN W. WEST, 876**
RONALD J. EIDSON, 3239
GARY L. JONES, 7977

BOP STACK

