

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Avenue, Artesia, NM 88210  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

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 March 17, 1999

Submit to appropriate District Office  
State Lease - 6 Copies  
Fee Lease - 5 Copies

☐ AMENDED REPORT

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

<sup>1</sup> Operator Name and Address Hal J. Rasmussen 550 W. Texas Suite 200 Midland, Texas 79701		<sup>2</sup> OGRID Number 9809
		<sup>3</sup> API Number 30 - 025-27936
<sup>3</sup> Property Code 32196	<sup>5</sup> Property Name Amoco Stone	<sup>6</sup> Well No. # 1

**<sup>7</sup> Surface Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	22	15S	38S		1500	North	1980	East	Lea

**<sup>8</sup> Proposed 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

<sup>9</sup> Proposed Pool 1 Medicine Rock Devonian	<sup>10</sup> Proposed Pool 2
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<sup>11</sup> Work Type Code E	<sup>12</sup> Well Type Code O	<sup>13</sup> Cable/Rotary R	<sup>14</sup> Lease Type Code P	<sup>15</sup> Ground Level Elevation 3744 KB
<sup>16</sup> Multiple N	<sup>17</sup> Proposed Depth 12660	<sup>18</sup> Formation Devonian	<sup>19</sup> Contractor Unknown	<sup>20</sup> Spud Date ASAP

**<sup>21</sup> Proposed Casing and Cement Program**

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
17 1/2"	13 3/8"	61#	373	400	Surface-In Place
11"	8 5/8"	24# & 32#	4884	1250	Surface-In Place
7 7/8"	5 1/2"	17# & 20#	12780-3900	1350	3900ft-In Place

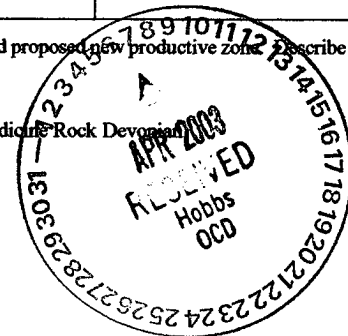
<sup>22</sup> Describe the proposed program. If this application is to DEEPEN or PLUG BACK, give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

Hal J. Rasmussen proposes to reenter the well plugged by Maralo in 1994. Drill out cement plugs to PBTD of 12660ft to test the Medicine Rock Devonian

3000 psi BOP will be used during the drilling and completion operations

Fresh water will be used from surface to PBTD

Permit Expires 1 Year From Approval  
Date Unless Drilling Underway  
Re-Entry



<sup>23</sup> I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Michael S. Prichard*

Printed name: Michael Prichard

Title: Agent

Date: 03/27/2003

Phone (915) 687-1664

Greg Rasmussen

**OIL CONSERVATION DIVISION**

Approved by: *[Signature]*

Title: PETROLEUM ENGINEER

Approval Date: APR 10 2003

Expiration Date:

Conditions of Approval:

Attached ☐

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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 15, 2000  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

☐ AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number 30-025-27936	<sup>2</sup> Pool Code 45480	<sup>3</sup> Pool Name Medicine Rock Devonian
<sup>4</sup> Property Code 32196	<sup>5</sup> Property Name Amoco Stone	<sup>6</sup> Well Number # 1
<sup>7</sup> OGRID No 9809	<sup>8</sup> Operator Name Hal J. Rasmussen	<sup>9</sup> Elevation 3744 KB

**<sup>10</sup> Surface Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	22	15S	38E		1500	North	1980	East	Lea

**<sup>11</sup> 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

<sup>12</sup> Dedicated Acres 80	<sup>13</sup> Joint or Infill N	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No. NSL R-7116
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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

<sup>16</sup> 	<b><sup>17</sup> OPERATOR CERTIFICATION</b> I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. <i>Michael S. Prichard</i> Signature Printed Name Michael Prichard Title Agent Date 4-9-2003
	<b><sup>18</sup> SURVEYOR CERTIFICATION</b> 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: See original plat filed in 9/11/1982 Certificate Number