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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-4-65

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.
E-8898

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name	
2. Name of Operator		9. Well No.	
Union Oil Company of California		1	
3. Address of Operator		10. Field and Pool, or Wildcat	
P.O. Box 671, Midland, Texas 79701		Undesignated	
4. Location of Well		12. County	
UNIT LETTER A LOCATED 660 FEET FROM THE East LINE AND 330 FEET FROM THE North LINE OF SEC. 56 TWP. 10-S RGE. 36-E NMPM		Lea	
19. Proposed Depth		19A. Formation	
11,300'		Atoka	
21. Elevations (Show whether DF, RT, etc.)		22. Approx. Date Work will start	
4051.3'		On Approval	
21A. Kind & Status Plug. Bond		21B. Drilling Contractor	
Blanket			

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15"	11-3/4"	42#	333'	450	Surface
11"	8-5/8"	32# & 24#	4100'	1680	Surface
7-7/8"	5-1/2"	20# & 17#	12,050'	250	10,500'

3000 psi Double Hydraulic Preventers.

Verbal approval obtained from Mr. Joe Ramey April 21, 1970.

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.

Signed Original Signed G. W. Coombes Title District Operations Manager Date April 21, 1970

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT DATE APR 23 1970

CONDITIONS OF APPROVAL, IF ANY:

NE. KICO 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.

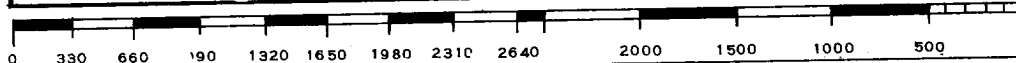
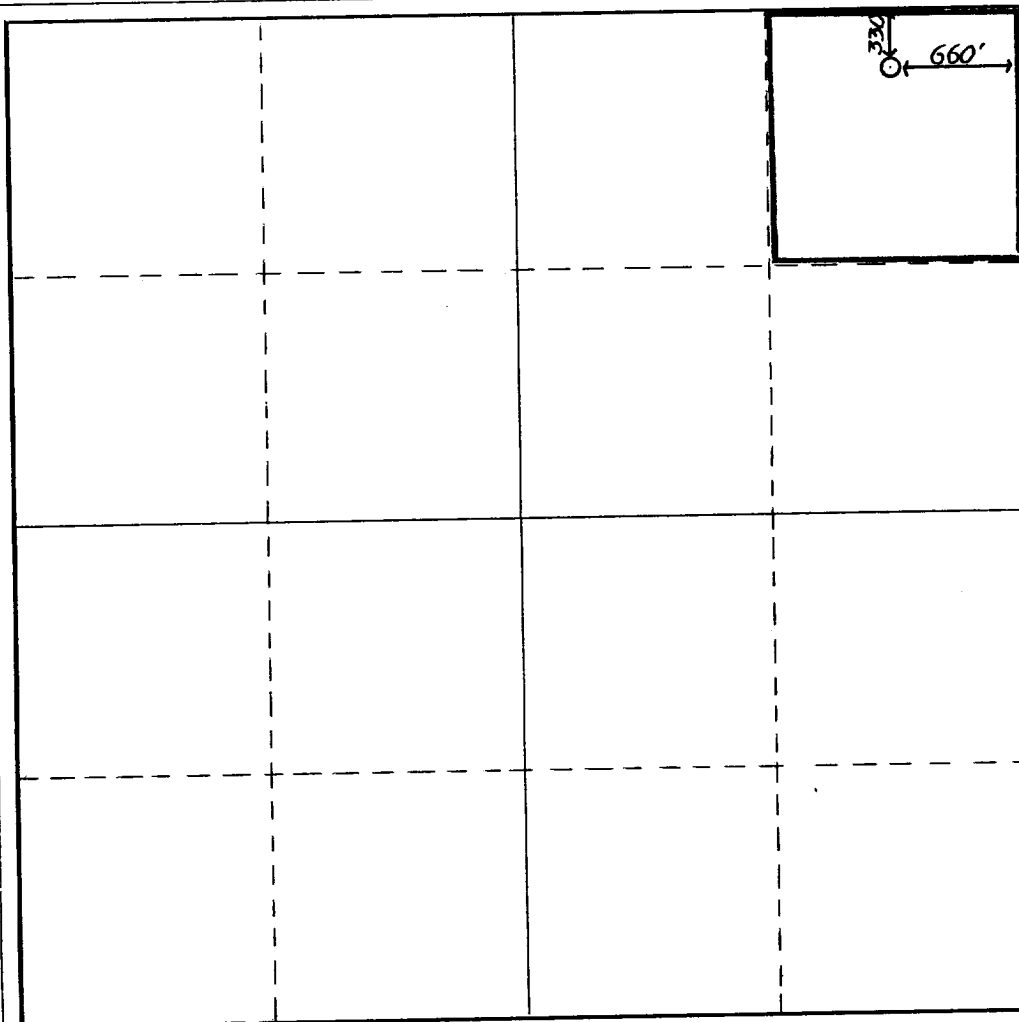
Operator Union Oil Company of California		Lease Lea "W" State		Well No. 1
Unit Letter A	Section 86	Township 10-S	Range 36-E	County Lea
Actual Footage Location of Well: 660 feet from the East line and 330 feet from the North line				
Ground Level Elev: 4051.3'	Producing Formation Atoka	Pool Undesignated	Dedicated Acreage: 40 Acres	

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.

Original Signed
G.W. Coombes

Name **G.W. Coombes**
Position **District Operations Manager**
Company **Union Oil Company of Calif.**
Date **4-21-70**

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 _____

Registered Professional Engineer and/or Land Surveyor

Certificate No. _____