

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 Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

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

Form C-101
August 1, 2011
Permit 184687

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

1. Operator Name and Address MURCHISON OIL & GAS INC 1100 Mira Vista Blvd. Plano, TX 75093		2. OGRID Number 15363
4. Property Code 39680		3. API Number 30-025-41784
5. Property Name MOGI 9 STATE COM		6. Well No. 006H

7. Surface Location

UL - Lot M	Section 9	Township 24S	Range 33E	Lot Idn M	Feet From 200	N/S Line S	Feet From 305	E/W Line W	County Lea
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8. Proposed Bottom Hole Location

UL - Lot D	Section 9	Township 24S	Range 33E	Lot Idn D	Feet From 330	N/S Line N	Feet From 350	E/W Line W	County Lea
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9. Pool Information

TRIPLE X;BONE SPRING, WEST	96674
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Additional Well Information

11. Work Type New Well	12. Well Type OIL	13. Cable/Rotary	14. Lease Type State	15. Ground Level Elevation 3605
16. Multiple N	17. Proposed Depth 15300	18. Formation 1st Bone Spring Sand	19. Contractor	20. Spud Date 6/10/2014
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

☐ We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	16	13.375	54.5	1300	700	0
Int1	12.25	9.625	40	5200	1300	0
Prod	8.5	5.5	17	15300	1700	3000

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Annular	5000	5000	Schaffer
Double Ram	5000	5000	Schaffer

23. I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify I have complied with 19.15.14.9 (A) NMAC ☒ and/or 19.15.14.9 (B) NMAC ☒ , if applicable. Signature: _____ Printed Name: Electronically filed by Michael Daugherty Title: COO Email Address: ccottrell@jdmii.com Date: 4/15/2014	OIL CONSERVATION DIVISION Approved By: Paul Kautz Title: Geologist Approved Date: 4/16/2014 Expiration Date: 4/16/2016 Conditions of Approval Attached
Phone: 972-931-0700	

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

¹ API Number	² Pool Code	³ Pool Name
	59900	Triple X; Bone Spring
⁴ Property Code	⁵ Property Name	⁶ Well Number
39680	MOG19 STATE COM	6H
⁷ OGRID No.	⁸ Operator Name	⁹ Elevation
155b3	MURCHISON OIL & GAS, INC.	3605.1

" Surface Location									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	9	24 S	22 E		200	SOUTH	365	WEST	LEA

BL or lot no.	Section	Township	Range	Loc. Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	9	24 S	22 E		330	NORTH	350	WEST	LEA

¹⁰ Deductible Acres	³ Joint or Infill	¹² Consolidation Code	⁵ Order No.
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[illegible]

It is hereby verified, under the aforementioned conditions, that the following is the true and correct knowledge and belief, and accurate representation, of the owner's working interest or advanced interest in the land including the proposed borrow hole location as he has a right to drill this well at this location pursuant to a contract that he entered of said mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore recorded, the location:

Signature _____ Date 04/15/2014

Steve Morris

Printed Name _____

smorris@idmii.com

Print Address

I hereby certify that the well location shown on this plat was located 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.

APPENDIX 5: NCPs

[illegible]

Signature and Seal of Professional Surveyor
Certificate Number: 01-12325-15-03-00001-2, P. 5 12797

SURVEY 40.236

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1220 S. St Francis Dr.
Santa Fe, NM 87505

Form APD Comments

 Permit 184687

PERMIT COMMENTS

Operator Name and Address: MURCHISON OIL & GAS INC [15363] 1100 Mira Vista Blvd. Plano, TX 75093	API Number: 30-025-41784
	Well: MOGI 9 STATE COM #006H

Created By	Comment	Comment Date
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Form APD Conditions
 Permit 184687

PERMIT CONDITIONS OF APPROVAL

Operator Name and Address: MURCHISON OIL & GAS INC [15363] 1100 Mira Vista Blvd. Plano, TX 75093		API Number: 30-025-41784
		Well: MOGI 9 STATE COM #006H

OCD Reviewer	Condition
pkautz	Will require a directional survey with the C-104
pkautz	Once the well is spud, to prevent ground water contamination through whole or partial conduits from the surface, the operator shall drill without interruption through the fresh water zone or zones and shall immediately set in cement the water protection string
pkautz	1) SURFACE & INTERMEDIATE CASING - Cement must circulate to surface -- 2) PRODUCTION CASING - Cement must tie back into intermediate casing --
pkautz	Surface casing must be set 25' below top of Rustler Anhydrite in order to seal off protectable water