

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-8161 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) 334-8178 Fax:(505) 334-8170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3482

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 234644

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

1. Operator Name and Address GMT EXPLORATION COMPANY LLC 1560 Broadway Denver, CO 80202		2. OGRID Number 260511
		3. API Number 30-025-43800
4. Property Code 316830	5. Property Name SQUEEZE STATE COM	6. Well No. 002H

7. Surface Location

UL - Lot N	Section 2	Township 22S	Range 34E	Lot Idn N	Feet From 200	N/S Line S	Feet From 1700	E/W Line W	County Lea
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8. Proposed Bottom Hole Location

UL - Lot C	Section 2	Township 22S	Range 34E	Lot Idn C	Feet From 330	N/S Line N	Feet From 1700	E/W Line W	County Lea
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9. Pool Information

OJO CHISO;BONE SPRING	96553
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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 3566
16. Multiple N	17. Proposed Depth 15850	18. Formation 3rd Bone Spring Sand	19. Contractor	20. Spud Date 6/1/2017
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	17.5	13.375	54.5	1400	456	0
Int1	12.25	8.625	32	5400	1156	0
Prod	7.875	5.5	20	15850	2510	4000

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Double Ram	5000	5000	

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 <input checked="" type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input checked="" type="checkbox"/> if applicable. Signature: _____ Printed Name: Electronically filed by Marissa Walters Title: Pertotech Email Address: mwalters@gmtexploration.com Date: 5/10/2017	OIL CONSERVATION DIVISION Approved By: Paul Kautz Title: Geologist Approved Date: 5/11/2017 Expiration Date: 5/11/2019 Conditions of Approval Attached
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Form C-102
August 1, 2011
Permit 234044

WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30-025-43800	2. Pool Code 96553	3. Pool Name OJO CHISO;BONE SPRING
4. Property Code 316830	5. Property Name SQUEEZE STATE COM	6. Well No. 002H
7. OGRID No. 260511	8. Operator Name GMT EXPLORATION COMPANY LLC	9. Elevation 3566

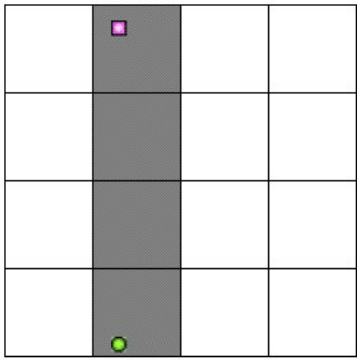
10. Surface Location

UL - Lot N	Section 2	Township 22S	Range 34E	Lot Idn N	Feet From 200	N/S Line S	Feet From 1700	E/W Line W	County Lea
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11. Bottom Hole Location If Different From Surface

UL - Lot C	Section 2	Township 22S	Range 34E	Lot Idn C	Feet From 330	N/S Line N	Feet From 1700	E/W Line W	County Lea
12. Dedicated Acres 162.22			13. Joint or Infill		14. Consolidation Code Communitization			15. Order No.	

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

	<p style="text-align: center;">OPERATOR CERTIFICATION</p> <p><i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location(s) or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i></p> <p>E-Signed By: Marissa Walters Title: Pertotech Date: 5/10/2017</p> <hr/> <p style="text-align: center;">SURVEYOR CERTIFICATION</p> <p><i>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.</i></p> <p>Surveyed By: Gary Jones Date of Survey: 11/28/2016 Certificate Number: 7977</p>
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Form APD Comments
 Permit 234644

PERMIT COMMENTS

Operator Name and Address: GMT EXPLORATION COMPANY LLC [260511] 1560 Broadway Denver, CO 80202		API Number: 30-025-43800
		Well: SQUEEZE STATE COM #002H
Created By mwalters	Comment C102 to be send via email to Paul Kautz The FTP will be 330' FSL as noted on C102	Comment Date 5/10/2017

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Form APD Conditions

Permit 234644

PERMIT CONDITIONS OF APPROVAL

Operator Name and Address: GMT EXPLORATION COMPANY LLC [260511] 1560 Broadway Denver, CO 80202	API Number: 30-025-43800
	Well: SQUEEZE STATE COM #002H

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	If using a pit for drilling and completion operations, must have an approved pit from prior to spudding the well.
pkautz	1) SURFACE & INTERMEDIATE CASING - Cement must circulate to surface -- 2) PRODUCTION CASING - Cement must tie back into intermediate casing --
pkautz	If cement does not circulate to surface, must run temperature survey or other log to determine top of cement
pkautz	Surface casing must be set 25' below top of Rustler Anhydrite in order to seal off protectable water
pkautz	Only Fresh Water and Air are Valid Drilling Fluids for Surface Casing
pkautz	Operator shall notify appropriate District office when setting conductor pipe.
pkautz	1)- The Operator is to notify NMOCD by sundry (Form C-103) within ten (10) days of the well being spud 2)- Drilling Sundries Form C-103 (Casing and Cement test are to be submitted within 10 days 3)- Completion Reports & Logs are to be submitted within 20 days 4)- Deviation / Directional Drill Survey are to be filed with or prior to C-104
pkautz	It is the operator's responsibility to monitor cancellation dates of approved APDs. APD's are good for 2 years and may be extended for one year. Only one 1 year extension will be granted if submitted by C-103 before expiration date. After expiration date or after a 1 year extension must submit new APD.
pkautz	Must notify OCD Hobbs Office if lost circulation is encountered at 575-370-3186
pkautz	Stage Tool 1) Must notify OCD Hobbs Office prior to running Stage Tool at 575-370-3186 2) If using Stage Tool on Surface casing, Stage Tool must be set greater than 350' from surface and a minimum of 200 feet above surface shoe. 3) When using a Stage Tool on Intermediate or Production Casing Stage must be a minimum of 50 feet below previous casing shoe.
pkautz	Operator to Submit Gas Capture Plan form prior spud
pkautz	