

OIL CONSERVATION DIVISION

Form C-101  
Revised 10-1-78

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SANTA FE	
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
OPERATOR	

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501  
API # 30-057-20007

5A. Indicate Type of Lease  
STATE  FEDERAL

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work  
b. Type of Well DRILL  DEEPEN  PLUG BACK   
OIL WELL  GAS WELL  OTHER  SINGLE ZONE  MULTIPLE ZONE

2. Name of Operator  
M. A. ROMERO

3. Address of Operator  
Box 5155 1419 Madrid Rd., Santa Fe, NM 87502

4. Location of Well  
UNIT LETTER P LOCATED 535 FEET FROM THE East LINE  
AND 447 FEET FROM THE South LINE OF SEC. 13 TWP. 4N RGE. 7E NMPM

7. Unit Agreement Name

8. Farm or Lease Name  
Sam Shaw

9. Well No.  
2

10. Field and Pool, or Wildcat

12. County  
Torrance

19. Proposed Depth  
3000'

19A. Formation  
Pennsylvania

20. Rotary or C.T.  
Rotary

21. Elevations (Show whether DI, RI, etc.)  
6350' GL

21A. Kind & Status of Well  
\$7,500.00 Single Hole

21B. Drilling Contractor  
Chesney Drilling Co.

22. Approx. Date Work will start  
Nov. 28, 1989

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
8 7/8	7 5/8	23 lbs.	213	20	Surface
6 1/4					

Well is to be drilled to test Sangre de Cristo Formation and Madera Formation

Additional casing to be set as needed for drilling requirements, and in compliance with State regulations.

To be plugged in accordance with State of New Mexico requirements should plugging be necessary.

APPROVAL VALID FOR 90 DAYS  
PERMIT # 2-25-80  
UNLESS OTHERWISE UNDERWAY

COLLECT 1/2 GALLONS FOR  
NEW MEXICO STATE LABORATORY, COCORRO  
AT AT LEAST TEN FOOT INTERVALS

OIL CONSERVATION COMMISSION TO BE NOTIFIED  
WITHIN 24 HOURS OF BEGINNING OPERATIONS

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.

Operator MAR Title Operator Date Nov. 26, 1979

(This space for State Use)

PROVED BY Carl Ulvog TITLE SENIOR PERMITTING SPECIALIST DATE 11/27/79

CONDITIONS OF APPROVAL, IF ANY:

All distances must be from the outer boundaries of the Section.

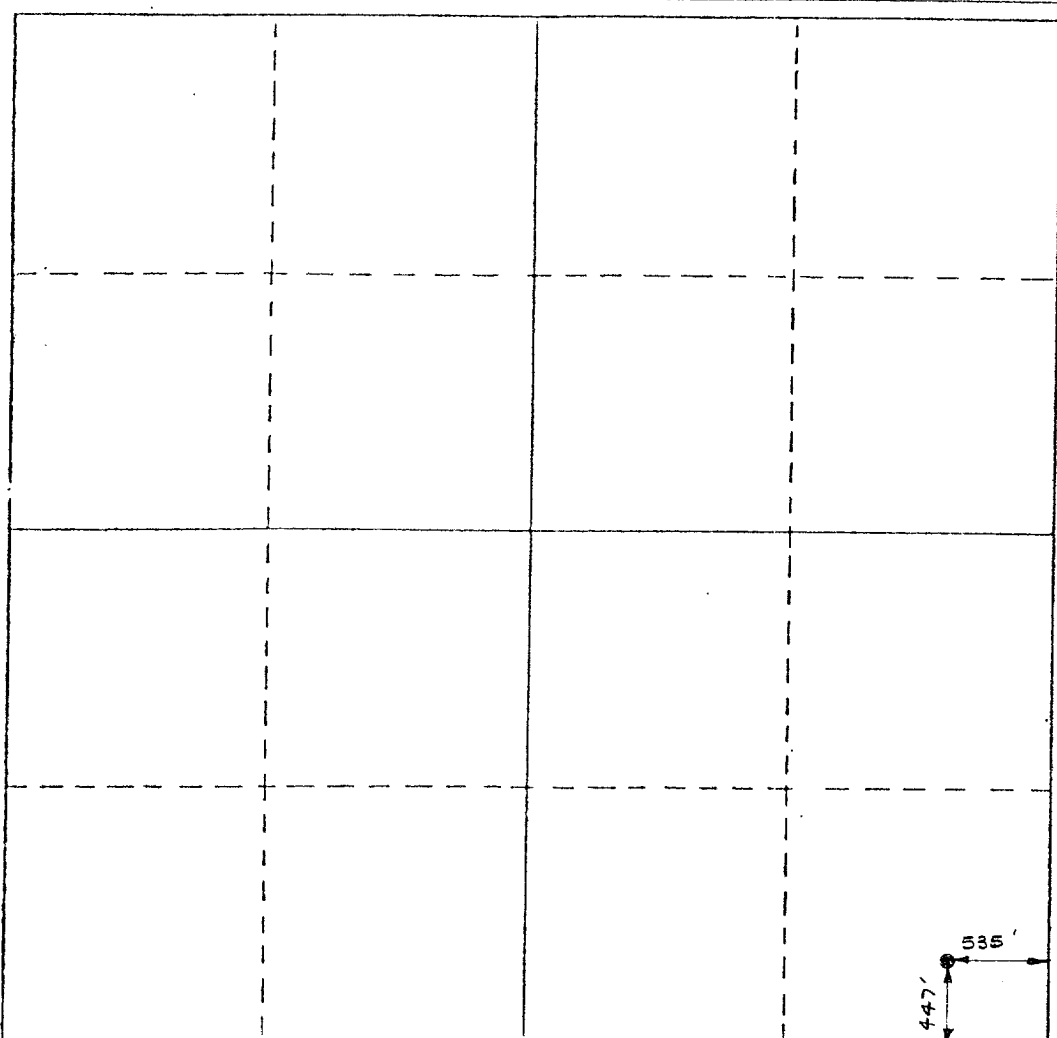
Operator <b>M.A. Romero</b>		Lease <b>Sam Shaw</b>		Well No. <b>Romero #2</b>	
Unit Letter <b>None</b>	Section <b>13</b>	Township <b>T4N</b>	Range <b>R7E</b>	County <b>Torrance</b>	
Actual Footage Location of Well: <b>447</b> feet from the <b>South Sec.</b> line and <b>535</b> feet from the <b>East Sec.</b> line					
Ground Level Elev. <b>6350</b>	Producing Formation <b>Upper Pennsylvania</b>		Pool <b>Wildcat</b>	Dedicated Acreage: <b>40</b> 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.) M.A. Romero

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 Division.



CERTIFICATION

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

**Cipriano Martinez**

Name

**President**

Position

**Martinez Surveying Co. I**

Company

**11/26/79**

Date

I hereby certify that the well location shown on this plot 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.

**11/21/79**

Date Surveyed

*Cipriano Martinez*  
Registered Professional Engineer  
and/or Land Surveyor

**3995**

Certificate No.

