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LAND OFFICE	
OPERATOR	

API # 30-057-20025

5A. Indicate Type of Lease
STATE ☐ FEE ☒
5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL ☒ DEEPEN ☐ PLUG BACK ☐				7. Unit Agreement Name	
5. Type of Well OIL WELL ☒ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐				8. Farm or Lease Name JUNO	
2. Name of Operator WILSON OIL CO. BRUCE WILSON				9. Well No. 1	
3. Address of Operator RT 2 BOX E-231, MORIAITY, N.M. 87031				10. Field and Pool, or Wildcat WILDCAT	
4. Location of Well UNIT LETTER <u>I</u> LOCATED <u>757</u> FEET FROM THE <u>EAST</u> LINE AND <u>1691</u> FEET FROM THE <u>SOUTH</u> LINE OF SEC. <u>6</u> TWP. <u>3N</u> RGE. <u>7E</u> NMPM				12. County TORREANCE	
11. Elevations (Show whether DF, RT, etc.) 6528		21A. Kind & Status Plug. Bond CASH		19. Proposed Depth 4900	
		21B. Drilling Contractor DENNISON DRILLING		19A. Formation GIPSON	
				20. Rotary or C.T. ROTARY	
				22. Approx. Date Work will start 6-12-87	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
9 3/4"	8 3/8"		700'	TO BE ACCELERATED	

AFTER SETTING SURFACE CASING, 7 3/8" TO TOTAL DEPTH.
NO BLOWOUT PREVENTER - AS NEARBY WELLS HAVE NOT USED ONE.
IF NOT PRODUCEABLE, THEN PLUG & ABANDON.

ILLEGIBLE

APPROVAL VALID FOR 90 DAYS
EXPIRES 9-12-87
UNLESS DRILLING UNDERWAY

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 Bruce Wilson Title OWNER Date 6-12-87

(This Space for State Use)

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 6-12-87

CONDITIONS OF APPROVAL, IF ANY:

Blowout preventer is required.

Cement on surface casing is to be circulated and witnessed by O.C.D.

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

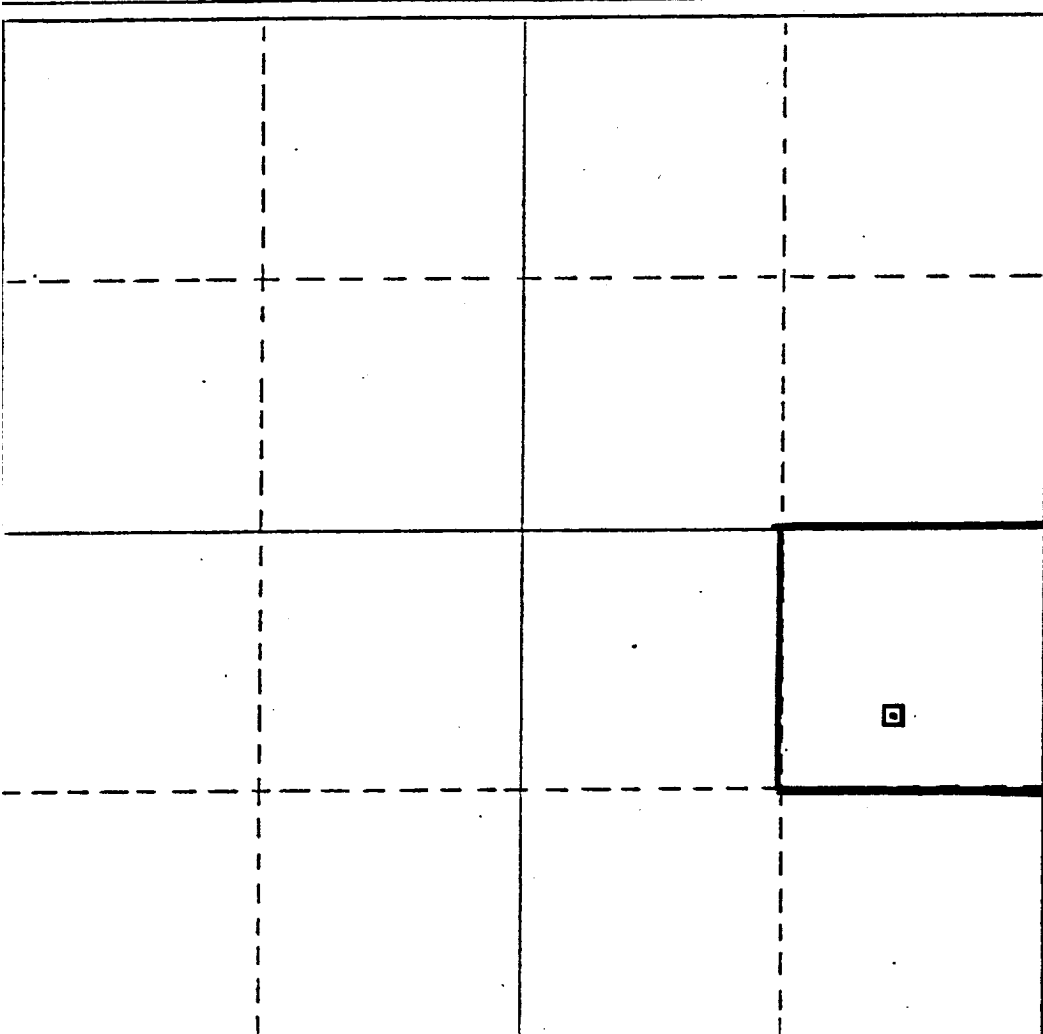
Operator <u>WILSON OIL CO.</u>		Lease <u>Judd</u>		Well No. <u>1</u>
Unit Letter	Section <u>6</u>	Township <u>3N</u>	Range <u>7E</u>	County <u>TORRANCE</u>
Actual Footage Location of Well: <u>757</u> feet from the <u>EAST</u> line and <u>1691</u> feet from the <u>SOUTH</u> line				
Ground Level Elev. <u>6528</u>	Producing Formation	Pool	Dedicated Acreage: <u>40</u> 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 Division.



CERTIFICATION

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

BRUCE WILSON
Name

OWNER
Position

WILSON OIL CO.
Company

6-12-87
Date

Bruce Wilson

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.

12 June 1987

Wm. Ray Dean
Date Surveyed

Registered Professional Engineer and/or Land Surveyor 438667

8667

Certificate No.