OCD-ARTESIA

IfIndian, Allotee or Tribe Name

FORM APPROVED OMB No. 1004-0137 Expires March 31, 2007

ATS-08-131

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL OR REENTER

Lease Serial	14
NM063926	

la. Type of work: X DRILL REEN	TER JUN (2 2008	D	7. If Unit or CA Agre West Square Lake	•	
	<i>ጠ</i> ል	ADTECIA		8. Lease Name and		
lb. Type of Well: X Oil Well Gas Well Other		Multip	ole Zone	WEST SQUARE I		
2 Name of Operator				9. API Well No.		
THOMPSON, J. CLEO	1			30-015-363	lolo	
3a. Address P.O. BOX 12577		No(include area cod	(e)	10. Field and Pool, or		
ODESSA, TX 79768	(432)5\$	0-8887 A _4	3. /	GRAYBURG - SA	N ANDRES	
4 Location of Well (Report location clearly and in accord	lance with this	THE FAMILIAND W		11. Sec., T. R. M or E	Blk. and Survey or A	
At surface 1470.7 FNL & 2630' FWL, UL: F	Y Y			UL: F Sec: 35 Tw	n:16S Rng: 30E	
Atproposed prod zone per attended 52	data	OCATION	-			
14. Distance in miles and direction from nearest town or p			12 County or Parish	13 State		
5 MILES NORTH OF LOCO HILLS, NM				EDDY	NM	
		acres in lease 17. Spacing Unit dedicated to this we		his well		
location to nearest property or lease line, ft. (Also to nearest drig. unit line, if any)	3320		40			
B. Distance from proposed location*		sed Depth 20 BLM/		BIA Bond No on file		
18. Distance from proposed location* to nearest well, drilling, completed, applied for, on this lease, ft. 860.9	4000'	4000'		- per J. Stevens 10348 10-29-07 Am		
					` ` `	
21 Elevations (Show whether DF, KDB, RT, GL, etc.)	2 2 Approximate date work will start*		2.3 Estimated duration	n		
3798' GL	10/01/	2007		1 WEEK		
	24. Atta	chments				
The following, completed in accordance with the requiren	nents of Onsh	ore Oil and Gas O	order No.1	, shall be attached to th	ıs form:	
Well plat certified by a registered surveyor.		4 Rondto cover t	the operati	ions unless covered by ar	existing bond on file	
A Drilling Plan		Item 20 above		ions unless covered by ai	CAISING DONG ON THE	
3 A Surface Use Plan (if the location is on National Forest System La	ands, the	5. Operator certifi	ication			
SUPO shall be filed with the appropriate Forest Service Offic	e)	6. Such other site specific information and/or plans as may be required by the authorized officer.				
25. Signature	Name	(Printed/Typed)		Dat	10/23/2-	

Title OPERATIONS MANAGER

Approved by(Signature)

/s/ Don Peterson

Name(Printed/Typed Don Peterson

MAY 2 9 2008

Title FOFIELD MANAGER Office

CARLSBAD FIELD OFFICE

Application approval does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon

Conditions of approval, if any, are attached

Title 18U.S.C Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

JIM STEVENS

*(Instructions on page 2)

NOTE: New Pit Rule NMAC 19-15-17

ROSWELL CONTROLLED WATER I

SEE ATTACHED FOR CONDITIONS OF APPROVAL AFFRUYAL SUBJECT TO GENERAL REQUIREMENTS AND SPECIAL STIPULATIONS ATTACHED

LEASE RESPONSIBLITY STATEMENT: WEST SQUARE LAKE UNIT NO. 5-18

J. CLEO THOMPSON and JAMES CLEO THOMPSON, JR., L.P. accepts all applicable terms, conditions, stipulations, and restrictions concerning operations conducted on the leased land or portion thereof.

J. E. Stevens

operations Manager