

451

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL OR DEEPEN

1a. TYPE OF WORK

DRILL DEEPEN

b. TYPE OF WELL

OIL WELL GAS WELL OTHER SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR

PRESCO, Inc. 183072

3. ADDRESS AND TELEPHONE NO.

c/o J. O. Easley, Inc., P. O. Box 245, Artesia, NM 88211-0245 (505) 746-1070

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. *)

At Surface 1800' FSL & 2283' FEL, Unit J
At proposed prod. Zone 1800' FSL & 2283' FEL, Unit J

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

± 10 miles northwest of Queen, New Mexico

15. DISTANCE FROM PROPOSED * LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT. 1800'
(Also to nearest drlg. unit line, if any)

18. DISTANCE FROM PROPOSED LOCATION *

TO NEAREST WELL, DRILLING, COMPLETED OR APPLIED FOR, ON THIS LEASE, FT. 0'

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

5789'

16. NO. OF ACRES IN LEASE

1920.00

17. NO. OF ACRES ASSIGNED TO THIS WELL

40

19. PROPOSED DEPTH

4000'

20. ROTARY OR CABLE TOOLS

Rotary

22. APPROX. DATE WORK WILL START *

ASAP

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	GRADE, SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17 1/2"	13 3/8" Conductor	14.79#	40'	Circulate to surface
8 3/4"	7" Surface	14.79#	1400'	Circulate
6 1/4"	4 1/2" Production	14.32#	4000'	Circulate

Anticipated Duration of Program: Drilling - Thirty (30) days
Completion - Sixty (60) to Ninety (90) days

See attached for complete Drilling Program

EXHIBITS

- Exhibit "A": Drilling Program
- Exhibit "B": Surface Use Plan
- Exhibit "C": Land Survey Plat
- Exhibit "D": Vicinity Plat
- Exhibit "E": Location Verification Plat
- Exhibit "F": Rig Layout
- Exhibit "G": BOP Layout

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen, give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED Michael R. Burch TITLE Permit Agent for PRESCO, Inc. DATE 7-3-97
Michael R. Burch, CPL

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

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:

APPROVED BY Tom Sanders TITLE Acting Field Mgr DATE 12/16/98

*See Instructions On Reverse Side

EXHIBIT "C"

DISTRICT I
P.O. Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised February 10, 1994
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

DISTRICT II
P.O. Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION
P.O. Box 2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

Santa Fe, New Mexico 87504-2088

DISTRICT IV
P.O. BOX 2088, SANTA FE, N.M. 87504-2088

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-	Pool Code	Pool Name ABO (WILDCAT TST)
Property Code	Property Name INDIAN CREEK FEDERAL	Well Number #1
OGRID No.	Operator Name PRESCO, INC.	Elevation 5789

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	14	23 S	20 E		1800	SOUTH	2283	EAST	OTERO

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 40	Joint or Infill	Consolidation Code	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>OPERATOR CERTIFICATION</p> <p>I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.</p> <p><i>Michael R. Burch</i> Signature Michael R. Burch, CPL Printed Name Permit Agent for Presco, Inc. Title 5-19-97 Date</p>
	<p>SURVEYOR CERTIFICATION</p> <p>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.</p> <p>MAY 9-12, 1997 Date Surveyed DMCC</p>
	<p>Date Surveyed Signature Professional Seal EDISON 5-14-97 8239 87-11-0806</p>
	<p>Certificate No. JOHN W. WEST 676 RONALD E. EDISON 3239 EDISON 12641</p>

BOP & CHOKE MANIFOLD

- 12" 9000 Cameron SS Space Saver
- 3000# Working Pressure
- 3000# Working Pressure Choke Manifold

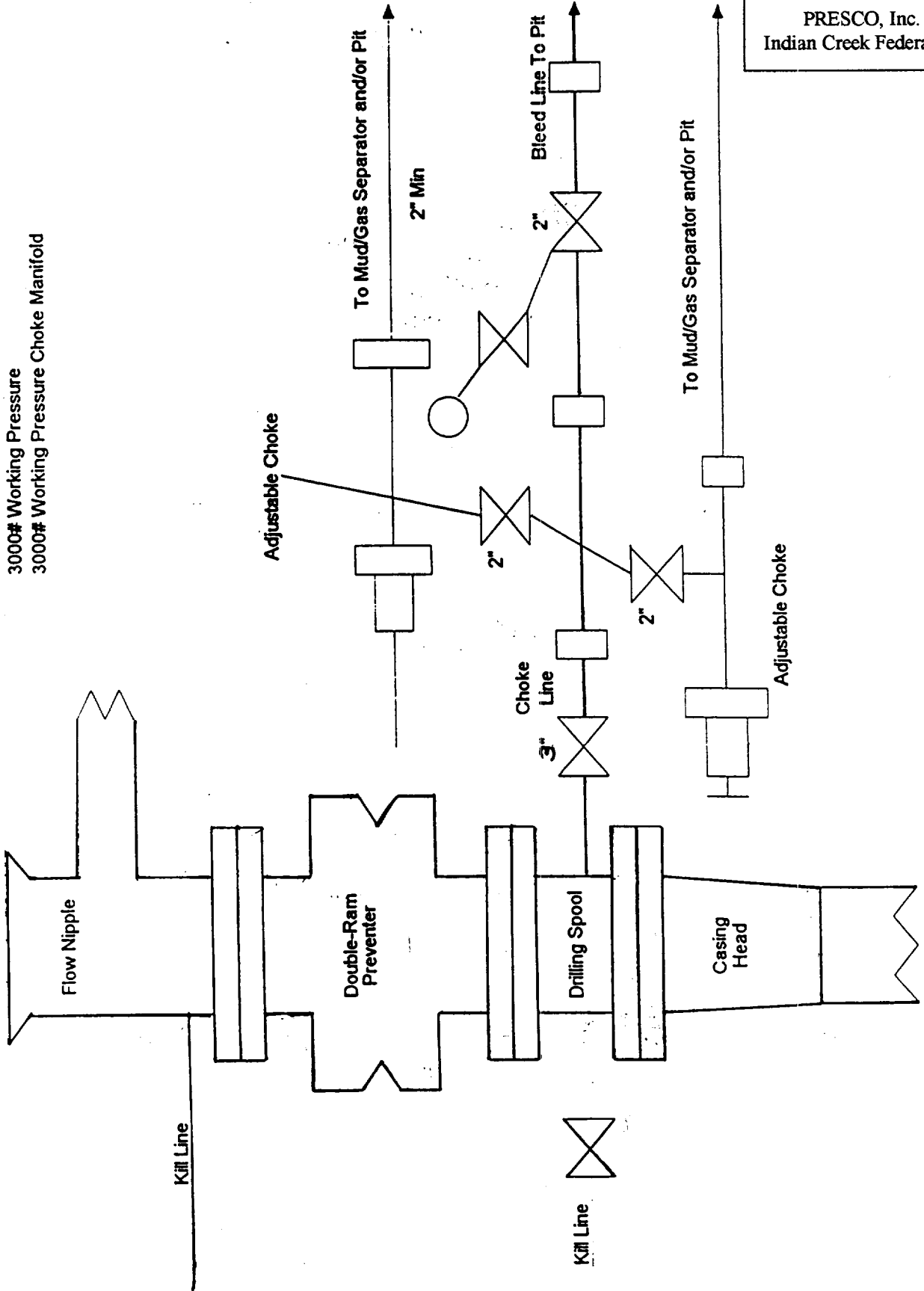


EXHIBIT "G"
BOP LAYOUT
PRESCO, Inc.
Indian Creek Federal #1