

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0135  
Expires July 31, 1996

**SUNDRY NOTICES AND REPORTS ON WELLS**

*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE - Other Instructions on reverse side**

|  |   |   |
|--|---|---|
| 1. Type of Well<br><input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other |   | 5. Lease Serial No.<br>NM-0467930                             |
| 2. Name of Operator<br>PREMIER OIL AND GAS, INC.   |   | 6. If Indian, Allottee or Tribe Name                          |
| 3a. Address<br>P.O. BOX 1246, ARTESIA, NM 88210  | 3b. Phone No. (include area code)<br>(505) 748-2093 | 7. If Unit or CA/Agreement, Name and/or No.                   |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br><br>990 FNL 1650 FWL, SEC. 22-T17S-R30E UNIT C         |   | 8. Well Name and No.<br>PARKE "A" FEDERAL #15                 |
|  |   | 9. API Well No.<br>30-015-30403                               |
|  |   | 10. Field and Pool, or Exploratory Area<br>LOCO HILLS PADDOCK |
|  |   | 11. County or Parish, State<br>EDDY CO., NM                   |

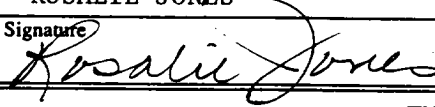
**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

| TYPE OF SUBMISSION                                | TYPE OF ACTION                                |   |  |  |
|---|---|---|--|--|
| <input type="checkbox"/> Notice of Intent         | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off                      |
| <input type="checkbox"/> Subsequent Report        | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity                      |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input checked="" type="checkbox"/> Other <u>CHANGE WELL</u> |
|   | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       | <u>NAME</u>  |
|   | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            |  |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

CHANGE NAME OF WELL TO: PARKE "A" FEDERAL #15

FROM: PARKE "A" FEDERAL #3

|   |                    |
|---|--------------------|
| 14. I hereby certify that the foregoing is true and correct                                     |                    |
| Name (Printed/Typed)<br>ROSALIE JONES   | Title<br>PRESIDENT |
| Signature<br> | Date<br>8/26/98    |

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

|   |       |        |
|---|-------|--------|
| Approved by   | Title | Date   |
| Conditions of approval, if any, are attached. Approval of this notice 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. |       | Office |

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING  
OFFICE FOR NUMBER

N. M. OIL CORP.

OF OIL & GAS  
(Other instructions on  
reverse side)

30-015-30403

BLM Roswell District  
Modified Form No.  
NMO60-3160-2

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

SINGLE  
ZONE ☐

MULTIPLE  
ZONE ☐

2. NAME OF OPERATOR

PREMIER OIL AND GAS, INC.

17985

3a. Area Code & Phone No.

505/748-2093

3. ADDRESS OF OPERATOR

P.O. BOX 1246, ARTESIA, NM 88211

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

At surface  
990 FNL 1650 FWL

At proposed prod. zone

SAME

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

EAST OF ARTESIA ON HWY 82 APPROX 27.1 MILES

15. DISTANCE FROM PROPOSED\*

LOCATION TO NEAREST  
PROPERTY OR LEASE LINE, FT.  
(Also to nearest drlg. unit line, if any)

990'

16. NO. OF ACRES IN LEASE

320

17. NO. OF ACRES ASSIGNED  
TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION\*  
TO NEAREST WELL, DRILLING, COMPLETED,  
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

6000'

20. ROTARY OR CABLE TOOLS

ROTARY

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

3670' GR

22. APPROX. DATE WORK WILL START\*

SEPTEMBER 15, 1998

PROPOSED CASING AND CEMENTING PROGRAM

| HOLE SIZE | CASING SIZE | WEIGHT/FOOT | GRADE | THREAD TYPE | SETTING DEPTH | QUANTITY OF CEMENT                              |
|-----------|-------------|-------------|-------|-------------|---------------|---|
| 12 1/4"   | 8 5/8"      | 24#         | J-55  | LTC         | 350'          | 300 SX  |
| 7 7/8"    | 5 1/2"      | 17#         | J-55  | LTC         | 6000'         | SUFFICIENTLY COVER<br>ALL OIL & GAS<br>HORIZONS |

PAY ZONE WILL BE SELECTIVELY STIMULATED AND PERFORATED AS  
NEEDED FOR OPTIMUM PRODUCTION.

Bureau of Land Management  
Received

AUG 18 1998  
Carlsbad Field Office  
Carlsbad, N.M.

- ATTACHMENT ARE:
1. ACREAGE LOCATION & DEDICATION PLAT
  2. SURFACE USE PLAN
  3. SUPPLEMENTAL DRILLING DATA

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. 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.

SIGNED Armando Lopez

TITLE PRESIDENT

DATE 8/13/98

(This space for Federal or State office use)

PERMIT NO.

(ORIG. SGD.) ARMANDO A. LOPEZ

Acting Assistant Field Office Manager,  
Lands and Minerals

APPROVED BY

TITLE

DATE SEP 10 1998

CONDITIONS OF APPROVAL, IF ANY:



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

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

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

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

|                    |   |                                 |
|--------------------|---|---------------------------------|
| API Number         | Pool Code<br>96718                      | Pool Name<br>LOCO HILLS Paddock |
| Property Code      | Property Name<br>PARKE "A" FEDERAL      | Well Number<br>3                |
| OGRID No.<br>17985 | Operator Name<br>PREMIER OIL & GAS INC. | Elevation<br>3670               |

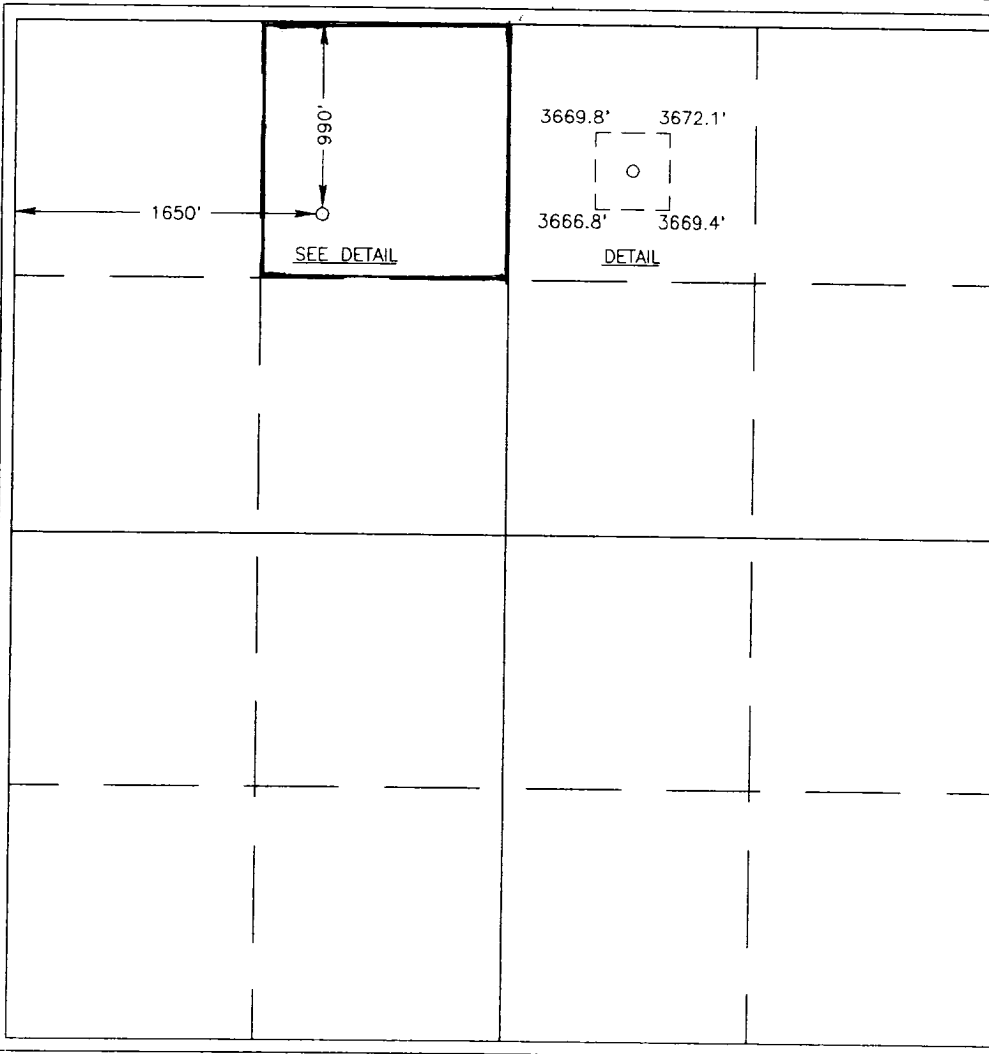
Surface Location

|                    |               |                  |               |         |                      |                           |                       |                        |                |
|--------------------|---------------|------------------|---------------|---------|----------------------|---------------------------|-----------------------|------------------------|----------------|
| UL or lot No.<br>C | Section<br>22 | Township<br>17 S | Range<br>30 E | Lot Idn | Feet from the<br>990 | North/South line<br>NORTH | Feet from the<br>1650 | East/West line<br>WEST | County<br>EDDY |
|--------------------|---------------|------------------|---------------|---------|----------------------|---------------------------|-----------------------|------------------------|----------------|

Bottom Hole Location If Different From Surface

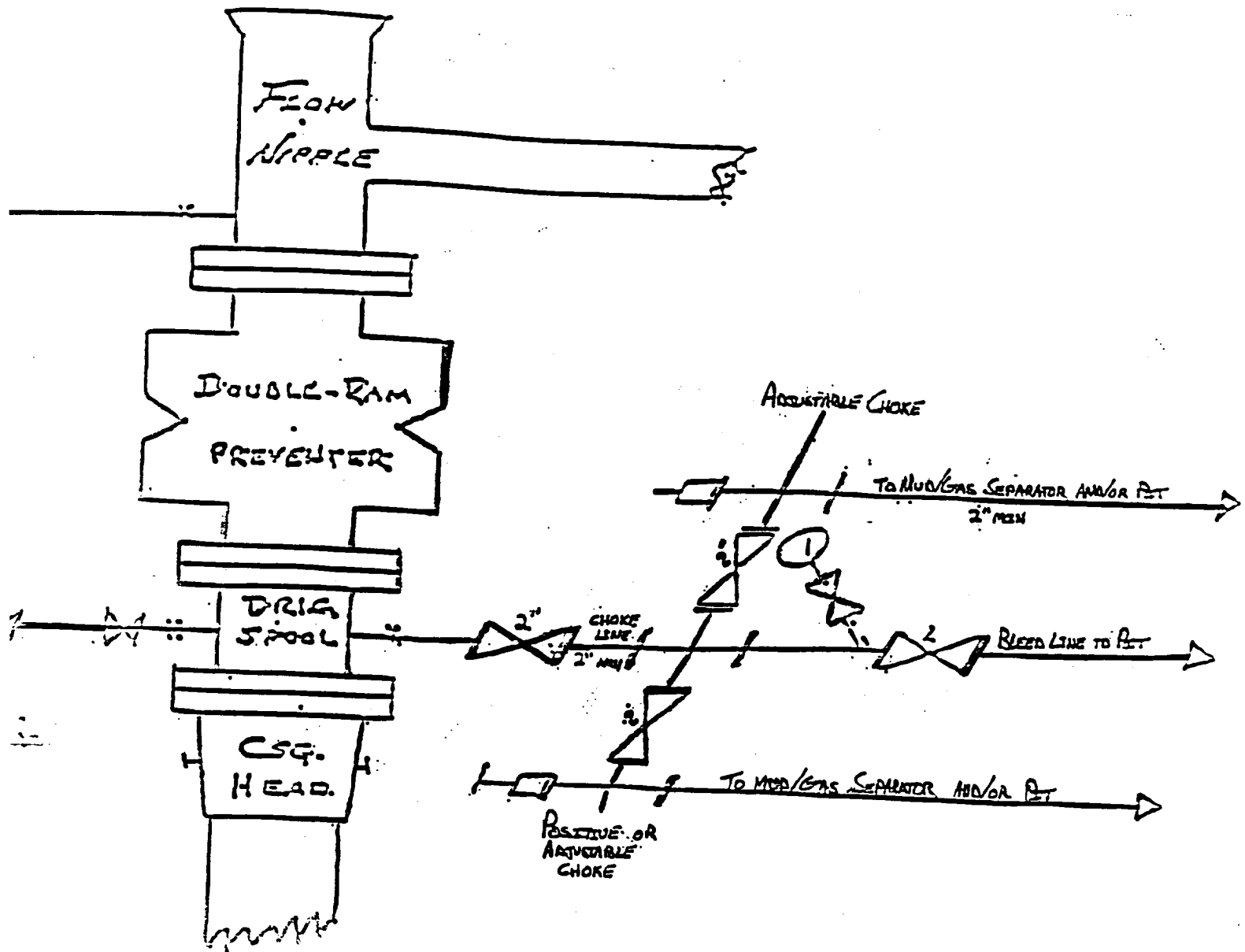
|                       |                 |                    |           |         |               |                  |               |                |        |
|-----------------------|-----------------|--------------------|-----------|---------|---------------|------------------|---------------|----------------|--------|
| UL or lot No.         | Section         | Township           | Range     | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
| Dedicated Acres<br>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><b>OPERATOR CERTIFICATION</b></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>Rosalie Jones</i><br/>Signature</p> <p>ROSALIE JONES<br/>Printed Name</p> <p>PRESIDENT<br/>Title</p> <p>8/13/98<br/>Date</p> <p><b>SURVEYOR CERTIFICATION</b></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>AUG 15 1998<br/>Date Surveyed</p> <p>Signature &amp; Seal of Professional Surveyor<br/><i>Ronald J. Eidson</i><br/>8-07-98</p> <p>Certificate No. RONALD J. EIDSON 3239<br/>GARY EIDSON 12641<br/>MACON McDONALD 12185</p> |
|---|---|



# BLOW OUT PREVENTER AND CHOKE MANIFOLD



## PREMIER OIL & GAS INC.

Parke "A" Federal #3  
990' FNL & 1650' FWL  
Section 22; T17s -- R30e  
Eddy County, New Mexico

Exhibit # 1

10"/900 Cameron SS Space Saver  
3000# Working Pressure  
3000# Working Pressure Choke Manifold

**Attachment to Exhibit #1**  
**NOTES REGARDING THE BLOWOUT PREVENTERS**

1. Drilling nipple to be so constructed that it can be removed without use of a welder through rotary table opening, with minimum I.D. equal to preventer bore.
2. Wear ring to be properly installed in head.
3. Blow out preventer and all fittings must be in good condition, 1000 psi W.P. minimum.
4. All fittings to be flanged.
5. Safety valve must be available on rig floor at all times with proper connections, valve to be full bore 1000 psi W.P. minimum.
6. All choke and fill lines to be securely anchored, especially ends of choke lines.
7. Equipment through which bit must pass shall be at least as large as the diameter of the casing being drilled through.
8. Kelly cock on kelly.
9. Extension wrenches and hand wheels to be properly installed.
10. Blow out preventer control to be located as close to driller's position as feasible.
11. Blow out preventer closing equipment to include minimum 40 gallon accumulator, two independent sources of pump power on each closing unit installation, and meet all API specifications.