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NEW MEXICO OIL CONSERVATION COMMISSION

RECEIVED

30-015-22698  
Form C-101  
Revised 1-1-65

SEP 21 1978

O. C. C.  
ARTESIA, OFFICE

|                                                                                                      |
|------------------------------------------------------------------------------------------------------|
| 5A. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.<br><b>L 1607</b>                                                        |
| 7. Unit Agreement Name                                                                               |
| 8. Farm or Lease Name<br><b>New Mexico State "AA"</b>                                                |
| 9. Well No.<br><b>1</b>                                                                              |
| 10. Field and Pool, or Wildcat<br><b>Undasig. N. Turkey Track</b>                                    |
| 11. County<br><b>Eddy</b>                                                                            |
| 19. Proposed Depth<br><b>11,200</b>                                                                  |
| 19A. Formation<br><b>Morrow</b>                                                                      |
| 20. Rotary or C.T.<br><b>Rotary</b>                                                                  |
| 21. Elevation (Show whether D.P., R.I., etc.)<br><b>3481.5 G. L.</b>                                 |
| 21A. Kind & Status Plug. Bond<br><b>Blanket on File</b>                                              |
| 21B. Drilling Contractor<br><b>Warten Drilg. Co.</b>                                                 |
| 22. Approx. Date Work will start<br><b>10-1-78</b>                                                   |

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

|                                                                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Type of Work<br>DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>                                                                       |
| b. Type of Well<br>OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>                                                                      |
| 2. Name of Operator<br><b>Anadarko Production Company</b>                                                                                                                                             |
| 3. Address of Operator<br><b>P. O. Box 67, Loco Hills, New Mexico 88255</b>                                                                                                                           |
| 4. Location of Well<br>UNIT LETTER <b>F</b> LOCATED <b>1980</b> FEET FROM THE <b>North</b> LINE<br><b>1980</b> FEET FROM THE <b>West</b> LINE OF SEC. <b>35</b> TWP. <b>18S</b> RGE. <b>28E</b> ANDEM |
| 10. Proposed Depth<br><b>11,200</b>                                                                                                                                                                   |
| 19A. Formation<br><b>Morrow</b>                                                                                                                                                                       |
| 20. Rotary or C.T.<br><b>Rotary</b>                                                                                                                                                                   |
| 21. Elevation (Show whether D.P., R.I., etc.)<br><b>3481.5 G. L.</b>                                                                                                                                  |
| 21A. Kind & Status Plug. Bond<br><b>Blanket on File</b>                                                                                                                                               |
| 21B. Drilling Contractor<br><b>Warten Drilg. Co.</b>                                                                                                                                                  |
| 22. Approx. Date Work will start<br><b>10-1-78</b>                                                                                                                                                    |

23.

PROPOSED CASING AND CEMENT PROGRAM

| SIZE OF HOLE | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH | SACKS OF CEMENT | EST. TOP  |
|--------------|----------------|-----------------|---------------|-----------------|-----------|
| 17 1/2"      | 13-3/8"        | 48.04           | 350'          | 350             | Circulate |
| 12 1/2"      | 9-5/8"         | 34.04           | 3500'         | 800             | 1200'     |
| 7-7/8"       | 4-1/2"         | 11.64           | 11200'        | 1800            | 7900'     |

1. Rig up rotary tools.
2. Drill approximately 375', set and cement 13-3/8" casing; install 12" Shaffer Type B Hydraulic Blowout Preventer & test prior to drilling cement plug.
3. Drill to approximately 3500', run open hole logs, set and cement 9-5/8" casing to cover From-Seven Rivers Zone. Install 10" GK Hydrill - 3000# Blowout Preventer.
4. Drill to approximately 11,200', run Open Hole Logs and possibly one or more drill stem tests; set and cement 4 1/2" casing with 1000 sacks to cover any productive zones encountered.
5. Perforate Morrow, treat if necessary.
6. Equip well for production.
7. Place well on production.

Note: Gas has not been dedicated.

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED,

EXPIRES 12-25-78

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 Original Signed by [Signature] Title Area Supervisor Date September 20, 1978  
(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE SEP 25 1978

CONDITIONS OF APPROVAL, IF ANY: