*	-	<u>_</u>		<u> </u>	cht.			
Submit to Appropriate District Office State Lease - 6 copies	Energy, 1	State of New Me Minerals and Natural Re			Form C-101 Revised 1-1-89			
Fee Lease - 5 copies DISTRICT I	OILC	CONSERVATIO P.O. Box 208		API NO. (assigned by OCI) on New Wells)			
P.O. Box 1980, Hobbs, NN		30-015-27						
DISTRICT II P.O. Drawer DD, Artesia, I		anta Fe, New Merice	WED-2000	5. Indicate Type of Lease STATE FEE				
DISTRICT III 1000 Rio Brazos Rd., Azze	c, NM 87410	6. State Oil & Gas Lease No. NA						
	ION FOR PERMIT T	O DRILL, DEEPE	R LUG BACK					
La. Type of Work: DRILL	. X RE-ENTER	DEEPEN	PLUG BACK	7. Lease Name or Unit Ag	preement Name			
b. Type of Well: OIL GAS WELL WELL	OTHER	SINCLE ZONE	MULTELE	Heat Dad Labo				
. Name of Operator				West Red Lake				
•	y Corporation (1	Nevada) 🗸		#37				
3. Address of Operator		500 021-1 01	OV 70100	9. Pool name or Wildcat	Crayburg SA			
<u>20 North Br</u> 4. Well Location	oadway Suite I	500 Oklahoma Ci	ty, OK 73102	Red Lake, Queer	, Grayburg, SA			
	F : 1490 Feet Fr	om The <u>north</u>	Line and205	0 Feet From The	west Line			
Fortion	7 Townsh	up 18S Ram	nge 27E M	NMPM Eddy	County			
Section								
		10. Proposed Depth	11. F	ormation	12. Rotary or C.T.			
	///////////////////////////////////////	2450		an Andres	rotary			
3. Elevations (Show wheth		Kind & Status Plug. Bond	15. Drilling Contractor		Date Work will start			
3288.1		Blanket	to be deter		Varm Basin			
	· · · · · · · · · · · · · · · · · · ·	OPOSED CASING AN	SETTING DEPTH	SACKS OF CEMENT	EST. TOP			
SIZE OF HOLE	SIZE OF CASING conductor	WEIGHT PER FOOT	40'	Redimix	surface			
12 1/4"	surface	24	850'	$300 \ lead/100 \ ta$				
7 7/8"	surface	15.5	2450'	100 lead/250 ta				
plugged and regulations Enclosed is part of a f	l abandoned as p are enclosed. a detailed APD	San Andres is d er OCD regulatio prepared for th is on private s tention.	ns. Programs t e BLM on this p	o adhere to OCD roposed well. T M instructed us	rules and The well is to refile			
					10 697 <u>180</u> DAY 13 <u>11-77-73</u> 14 10 10 10 10 10 10 10			
		AM: IF PROPOSAL IS TO DEEPE	N OR FLUG BACK, GIVE DATA O!	N PRESENT PRODUCTIVE ZONE A	ND PROPOSED NEW PRODUCTIVE			
ZONE. GIVE BLOWOUT FREV		to the best of my knowledge and	belief.					
	Aller			ineer	<u>теApril_8, 1993</u>			
SKONATURE 100000	Joepson	m						
TYPE OR FRINT NAME	Randy Jackson				LEPHONE NO. 405-552-456			
(This space for State Use)								
APPROVED BY	1 1.0.1_		A. J		5-17-9-37			
	the paking		re beal		т. <u>5-17-93</u> .0. IN CUFF CIENT			
CONDITIONS OF APPROVAL, I		m	u beal		E 5-12-93 ID. IN OUFFICIENT CO CEMENTING THE			

- Submit to Appropriate District Office State Lease - 4 copies Fee Lease - 3 copies State of New Mexico

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Energy, Minerals and Natural Resources Department

Form C-102 Revised 1-1-89

EXHIBIT #2

## OIL CONSERVATION DIVISION P.0. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT I P.O. Box 1960, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Astec, NM 67410

# WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

|                                    |            |                           |                                                                                                                       |                |                     |              |             | 30011011   |                             |                                                                                                            |             |
|------------------------------------|------------|---------------------------|-----------------------------------------------------------------------------------------------------------------------|----------------|---------------------|--------------|-------------|------------|-----------------------------|------------------------------------------------------------------------------------------------------------|-------------|
| Operator                           | DE         | VON ENE                   | ERGY                                                                                                                  |                | Lease               | WEST         | RED LAK     | E UNIT     |                             | Well No. 37                                                                                                |             |
| Unit Letter                        | Section    |                           | Township                                                                                                              |                | Range               |              |             | _          | County                      |                                                                                                            |             |
| F                                  | · ·        | 7                         | 18 S                                                                                                                  | NUL            |                     | <b>2</b> 7 E | AST         | NMPM       |                             | EDDY                                                                                                       |             |
| Actual Footage Loc                 | ation of 1 | ell:                      |                                                                                                                       |                |                     |              |             |            | 1                           |                                                                                                            |             |
| 1490 real                          | t from the | NOF                       | TH Han and                                                                                                            |                | 2050                |              |             | feet from  | the WES                     | T line                                                                                                     |             |
| Ground Level Elev                  |            | lucing for                |                                                                                                                       | =              | Pool                |              |             | 1000 1100  |                             | Dedicated Acres                                                                                            |             |
| 3288.1'                            |            | San Ai                    | ndree                                                                                                                 |                | Wost                | Red          | Tako        |            |                             | 40                                                                                                         | Acres       |
| I. Outline the ac                  |            |                           |                                                                                                                       | by colored p   |                     |              |             | lat below. |                             |                                                                                                            | Acres       |
|                                    |            |                           |                                                                                                                       |                |                     |              | · r         |            |                             |                                                                                                            |             |
| 2. If more than                    |            |                           |                                                                                                                       |                | -                   |              | -           |            |                             | -                                                                                                          |             |
| 3. If more than<br>unitization, fo |            |                           | ent ownership is                                                                                                      | ) dedicated to | the well, he        | ve the in    | terest of a | dl owners  | been consoli                | idated by commu                                                                                            | uitization. |
| 🗌 Yes                              | [          | ] No                      | If answer is                                                                                                          | "yes" type of  | consolidati         | ac           |             |            |                             |                                                                                                            |             |
| If answer is "no                   |            | whers an                  | d tract descrip                                                                                                       | tions which h  | ave actually        | been con     | solidated.  | (Use reve  | rse side of                 |                                                                                                            |             |
| this form necess                   |            |                           | Ab a /4                                                                                                               | -1) /          |                     |              |             |            |                             |                                                                                                            |             |
| No allowable wi<br>otherwise) or w |            |                           |                                                                                                                       |                |                     |              |             |            |                             | uuzation, forced                                                                                           | -pooling.   |
| [                                  |            | r                         | 4                                                                                                                     |                |                     | [ ]          | ÷           |            | OPERAT                      | OR CERTIFIC                                                                                                | ATION       |
|                                    |            |                           |                                                                                                                       |                |                     |              |             |            |                             | by certify the the<br>in is true and com                                                                   | · .         |
|                                    |            | ]<br>                     | ġ                                                                                                                     |                |                     |              |             |            |                             | windge and belief.                                                                                         |             |
|                                    |            |                           | . 149                                                                                                                 |                |                     |              |             |            | Signature                   | In Al                                                                                                      |             |
|                                    |            | Ì                         |                                                                                                                       |                | •                   |              |             |            | Charl                       | WHow                                                                                                       |             |
|                                    |            | 1                         |                                                                                                                       |                |                     |              |             |            | Printed Nam                 | -                                                                                                          |             |
|                                    |            | ।<br>╞╴╤╴╼┲╵              |                                                                                                                       | ↓              |                     |              |             | ↓ ⊦        |                             | s W. Hors                                                                                                  | man         |
|                                    | _2050'     |                           | $\sim$ $\lambda / /$                                                                                                  |                |                     |              |             |            | Position                    |                                                                                                            |             |
|                                    |            | $: \setminus \setminus$   | $( \land \land$ | Ì              |                     |              |             |            | Distri<br>Compeny           | <u>ct Engine</u>                                                                                           | er          |
|                                    |            | $\langle / \rangle$       | ///,                                                                                                                  | 4              |                     |              |             |            | oompen)                     | Devon Ene                                                                                                  | rgy         |
|                                    |            | $\langle \rangle \rangle$ | $\land \land \land \land$                                                                                             |                |                     |              |             |            | Date                        | ation (Ne                                                                                                  | vada        |
|                                    |            |                           | $\langle / / / \rangle$                                                                                               | ]              |                     |              |             |            | Januar                      | y 25, 199                                                                                                  | 3           |
|                                    |            |                           | $\langle / / \rangle$                                                                                                 |                | ĺ                   |              |             |            | SURVEY                      | OR CERTIFICA                                                                                               | TION        |
|                                    |            |                           |                                                                                                                       |                |                     |              |             |            | i hereby certif             | y that the well loop                                                                                       | sion shown  |
|                                    |            |                           |                                                                                                                       |                | i                   |              |             |            | on this plat w              | as pietted from fie                                                                                        | id notes of |
|                                    |            |                           |                                                                                                                       |                |                     |              |             |            | estuel surveys              | made by me or<br>ut that the some i                                                                        | under my    |
|                                    | 1          | ļ                         |                                                                                                                       |                |                     |              |             |            |                             | a best of my in                                                                                            |             |
|                                    |            |                           |                                                                                                                       |                | Í                   |              |             |            | beilaf.                     |                                                                                                            |             |
|                                    |            |                           |                                                                                                                       |                |                     |              |             |            | Date Survey                 |                                                                                                            |             |
|                                    |            |                           |                                                                                                                       |                |                     |              |             |            |                             | EMBER 3, 199                                                                                               | 2           |
| <u> </u>                           | ·          |                           |                                                                                                                       | <b></b> -      | +                   |              |             |            | Signature &<br>Professional |                                                                                                            |             |
|                                    |            | ٠                         |                                                                                                                       |                | <br> <br> <br> <br> |              |             |            |                             | CARY L. JONGS<br>CARY L. JONGS<br>CARY L. JONGS<br>CARY L. JONGS<br>7977<br>So. JOHN M. W<br>ROMACO J. ESS |             |
|                                    |            |                           |                                                                                                                       |                |                     |              |             | ╕┟         |                             | GARY-L JO                                                                                                  | 155 7977    |
| 0 330 660                          | 990 13     | 20 1650                   | 1980 2310 26                                                                                                          | 40 200         | 0 1500              | 1000         | 500         | ò          | ġ                           | 2-11-1844                                                                                                  |             |

MINIMUM BLOWOUT PREVENTER REGUREMENTS

3,000 pel Working Pressure

West Red Lake Unit #37 Eddy County, New Mexico Exhibit #1





|    | OPI           | TIONAL   |
|----|---------------|----------|
| 16 | Flanged valve | 1-13/16* |

### CONTRACTOR'S OPTION TO FURNISH:

•

- 1.All equipment and connections above bradenhead or casinghead. Working pressure of preventers to be 3,000 pst, minimum.
- 2. Automatic accumulator (80 gallon, minimum) capable of closing BOP in 30 seconds or less and, holding them closed against full rated working pressure.
- 3.BOP controls, to be located near drillers position.
- 4.Kelly equipped with Kelly cock.
- 5.Inside blowout prevventer or its equivalent on derrick floor at all times with proper threads to fit pipe being used.
- 6.Kelly saver-sub equipped with rubber casing protector at all times.
- 7. Plug type blowout preventer tester.
- 8.Extra set pipe rams to fit drill pipe in use on location at all times.
- 9. Type RX ring gaskets in piece of Type R.

#### MEC TO FURNISH:

- 1.Bradenhead or casinghead and side valves.
- 2.Wear bushing, il required.

### GENERAL NOTES:

- 1. Deviations from this drawing may be made only with the express permission of MEC's Dritting Manager.
- 2.All connections, valves, fittings, piping, etc., subject to well or pump pressure must be flanged (eutlable clemp connections acceptable) and have minimum working pressure equal to rated working pressure of preventers up through chore. Valves must be full opening and suitable for high pressure mud service.
- 3.Controls to be of standard design and each marked, showing opening and closing position.
- 4. Chokes will be positioned so as not to hamper or delay changing of choke beens. Replaceable parts for edjustable choke, other been sizes, retainers, and choke wrenches to be conveniently located for immediate use.
- All values to be equipped with handwheels or handles ready for immediate use.
- 6.Choke lines must be suitably anchored.

- 7. Handwheels and extensions to be connected and ready for use.
- Valves adjacent to drilling spool to be kept open. Use outside valves except for emergency.
- All seemless steel control piping (3000 pel working pressure) to have flexible joints to avoid strees. Hasse will be permitted.
- 10.Casinghead connections shall not be used except in case of emergency.
- 11.Do not use kill line for routine III-up operations.

J MWP

. IWP

# Attachment to Exhibit #1 NOTES REGARDING BLOWOUT PREVENTORS West Red Lake Unit #37 Eddy County, New Mexico

- 1. Drilling nipple will be constructed so it can be removed mechanically without the aid of a welder. The minimum internal diameter will equal BOPE bore.
- 2. Wear ring will be properly installed in head.
- 3. Blowout preventor and all associated fittings will be in operable condition to withstand a minimum 3000 psi working pressure.
- 4. All fittings will be flanged.

•

- 5. A full bore safety valve tested to a minimum 3000 psi W.P. with proper thread connections will be available on the rotary rig floor at all times.
- 6. All choke lines will be anchored to prevent movement.
- 7. All BOP equipment will be equal to or larger in bore than the internal diameter of the last casing string.
- 8. Will maintain a kelly cock attached to the kelly.
- 9. Hand wheels and wrenches will be properly installed and tested for safe operation.
- 10. Hydraulic floor control for blowout preventor will be located as near in proximity to driller's controls as possible.
- 11. All BOP equipment will meet API standards and include a minimum 40 gallon accumulator having two independent means of power to initiate closing operation.

#### MINIMUM CHOKE MANIFOLD 3,000, 5,000 and 10,000 PSI Working Pressure



|     |                                                  |          | MINH      | MUM REOL     | REMENT    | s       |        | ······································ |         | وروانا المراجعات |
|-----|--------------------------------------------------|----------|-----------|--------------|-----------|---------|--------|----------------------------------------|---------|------------------|
|     |                                                  |          | 3,000 MWP |              | 5,000 MWP |         |        | 10.000 MWP                             |         |                  |
| No. |                                                  | 1.D.     | NOMINAL   | RATING       | LD.       | NOMINAL | RATING | I.D.                                   | NOMINAL | RATING           |
| 1   | Line from drilling spool                         |          | 3.        | 3,000        |           | 3.      | 5,000  |                                        | 3.      | 10,000           |
| 2   | Cross 3"x3"x3"x2"                                |          |           | 3,000        |           |         | \$.000 |                                        | 1       |                  |
| _   | Cross 3"x3"x3"x3"                                |          |           |              |           |         |        |                                        |         | 10,000           |
| 3   | Valves(1) Gale []<br>Plug [](2)                  | 3-1/8-   |           | 3,000        | 3-1/8*    |         | 5,000  | 3-1/8*                                 |         | 10,000           |
| 4   | Vaive Gate C<br>Plug ()(2)                       | 1-13/16* |           | 3,000        | 1-13/16*  |         | 5,000  | 1-13/16*                               |         | 10,000           |
| 48  | Valves(1)                                        | 2-1/16"  |           | 3,000        | 2-1/16*   |         | 5,000  | 3-1/8"                                 |         | 10,000           |
| 5   | Pressure Gauge                                   |          |           | 3,000        |           |         | 5,000  |                                        |         | 10,000           |
| 6   | Valves Gate C<br>Plug D(2)                       | 3-1/6*   |           | 3,000        | 3-1/8*    |         | 5,000  | 3-1/8"                                 |         | 10,000           |
| 7   | Adjustable Choke(3)                              | 2*       |           | 3,000        | 2*        |         | 5,000  | 2-                                     |         | 10.000           |
| 8   | Adjustable Choke                                 | t*       |           | 3,000        | 1*        |         | 5,000  | 2*                                     |         | 10,000           |
| 9   | Line                                             |          | 3*        | 3,000        | _         | 3*      | 5,000  |                                        | 3-      | 10,000           |
| 10  | Line                                             |          | 2*        | 3,000        |           | 2*      | 5,000  |                                        | 3-      | 10.000           |
| 11  | Valves Gale C<br>Plug C(2)                       | 3-1/8*   |           | 3,000        | 3-1/8*    |         | 5.000  | 3-1/8*                                 |         | 10,000           |
| 12  | Lines                                            |          | 3.        | 1,000        |           | 3.      | 1,000  |                                        | 3-      | 2.000            |
| 13  | Lines                                            |          | 3.        | 1,000        |           | 3.      | 1,000  | •                                      | 3-      | 2.000            |
| 14  | Remote reading compound standpipe pressure gauge |          |           | 3,000        |           |         | 5,000  | •                                      |         | 10,000           |
| 15  | Ges Separator                                    |          | 2'x5'     |              |           | 2'x5'   |        |                                        | 2'x5'   |                  |
| 16  | Line                                             |          | 4*        | 1,000        |           | 4*      | 1,000  |                                        | 4.      | 2.000            |
| 17  | Valves Gate D<br>Plug D(2)                       | 3-1/8*   |           | <b>3,000</b> | 3-1/8*    |         | 5,000  | 3-1/8*                                 |         | 10,000           |

(1) Only one required in Class 3M.

(2) Gate values only shall be used for Class 10M.

(3) Remote operated hydroulic choice required on 5,000 psi and 10,000 psi for drilling.

### EQUIPMENT SPECIFICATIONS AND INSTALLATION INSTRUCTIONS

- 1. All connections in choice manifold shall be welded, studded, flanged or Cameron clamp of comparable rating.
- 2. All flanges shall be API 6B or 6BX and ring gaskets shall be API RX or BX. Use only BX for 10 MWP.
- 3. All lines shall be securely anchored.
- 4. Chokes shall be equipped with tungsten carbide seats and needles, and replacements shall be evaluable.
- 5. Choke manifold pressure and standpipe pressure gauges shall be available at the choke manifold to assist in regulating chokes. As an alternate with automatic chokes, a choke manifold pressure gauge shall be located on the rig floor in conjunction with the standpipe pressure gauge.
- Line from drilling spool to choke manifold should be as straight as possible. Lines downstream from chokes shall make turns by large bends or 90° bends using buil plugged tees.
- 7. Discharge lines from chokes, choke bypass and from top of gas separator should vent as far as practical from the well.