

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

State	✓
District Office	✓
Operator	✓

Form C-101
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

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

API NO. (assigned by OCD on New Wells)

30-015-26155

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

K-6852

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☒

RECEIVED
MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

State 2

2. Name of Operator

ARCO OIL AND GAS COMPANY

8. Well No.

3

3. Address of Operator

Box 1610, Midland, Texas 79702

9. Pool name or Wildcat

Shugart Y7RQG

4. Well Location

Unit Letter D : 590 Feet From The North

ARRESIA, OFFICE

Line and 660

Feet From The West

Line

Section 2

Township 19S

Range 30E

NMPM

Eddy

County

10. Proposed Depth

3350

11. Formation

Queen

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

3451.6 GR

14. Kind & Status Plug. Bond

Statewide Blanket

15. Drilling Contractor

Not Assigned

16. Approx. Date Work will start

8-1-89

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4	8-5/8	24	600	400	Surf
7-7/8	5-1/2	15.5	3350	500	Surf

POST ID-1
NL & API
7-28-89

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 1-21-90
UNLESS DRILLING UNDERWAY

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.

SIGNATURE Ken W. Gosnell TITLE Engr. Tech. DATE 7-18-89

TYPE OR PRINT NAME Ken W. Gosnell 915/688-5672 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE JUL 21 1989

CONDITIONS OF APPROVAL, IF ANY:

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

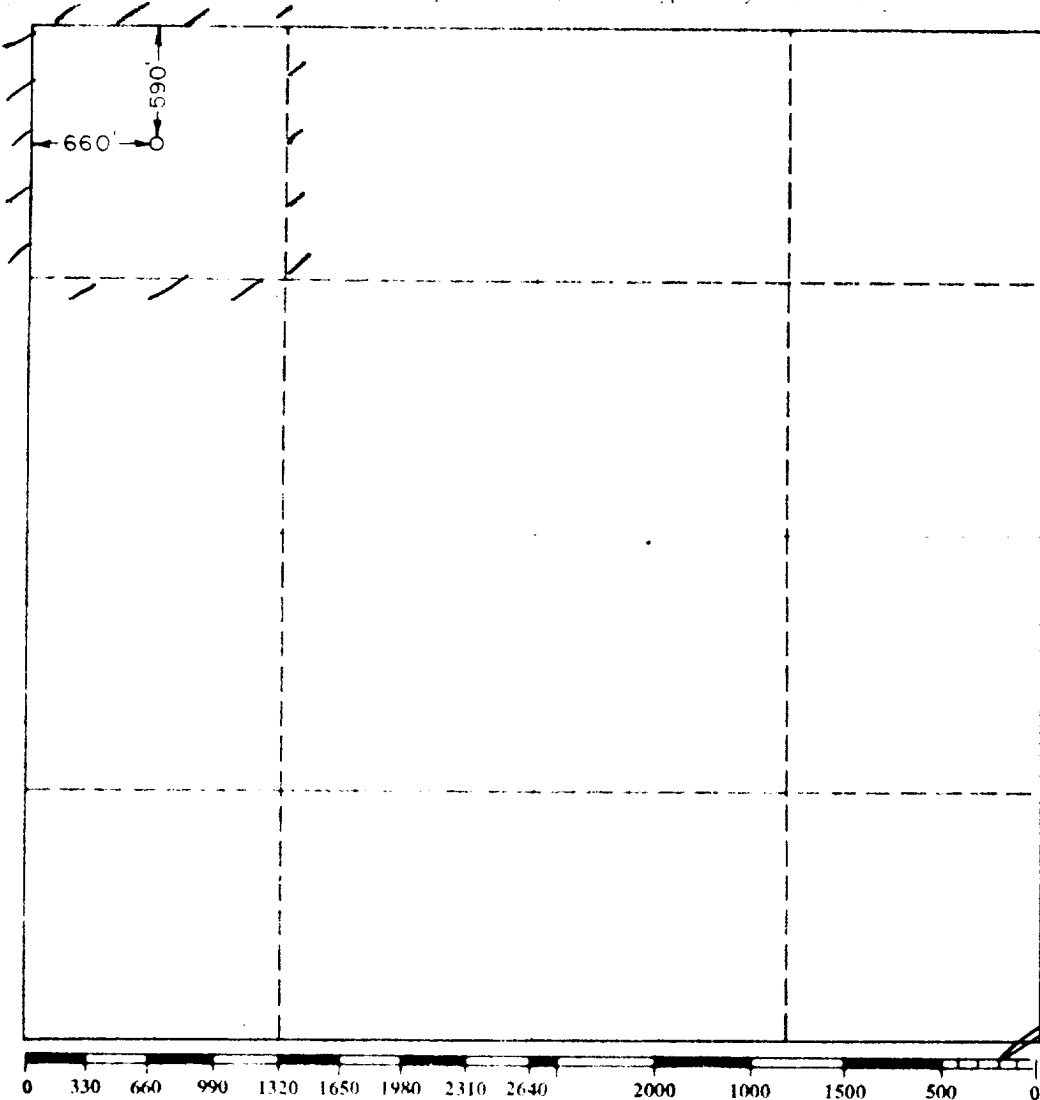
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator ARCO Oil & Gas Co. Lease Well No.
Unit Letter D Section 2 Township 19 South Range 30 East State 2 County Eddy
Actual Footage Location of Well NMPM
Ground level Elev 3451.6' feet from the north line and 660 feet from the west line
Producing Formation Queen Pool Shugart Dedicated Acreage 40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, forced pooling, etc.?
Yes No If answer is "yes" type of consolidation
If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary)
No allowance will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

Signature Ken W. Gosnell
Printed Name Ken W. Gosnell
Position Engr. Tech.
Company Arco Oil & Gas Co.
Date 7-18-89

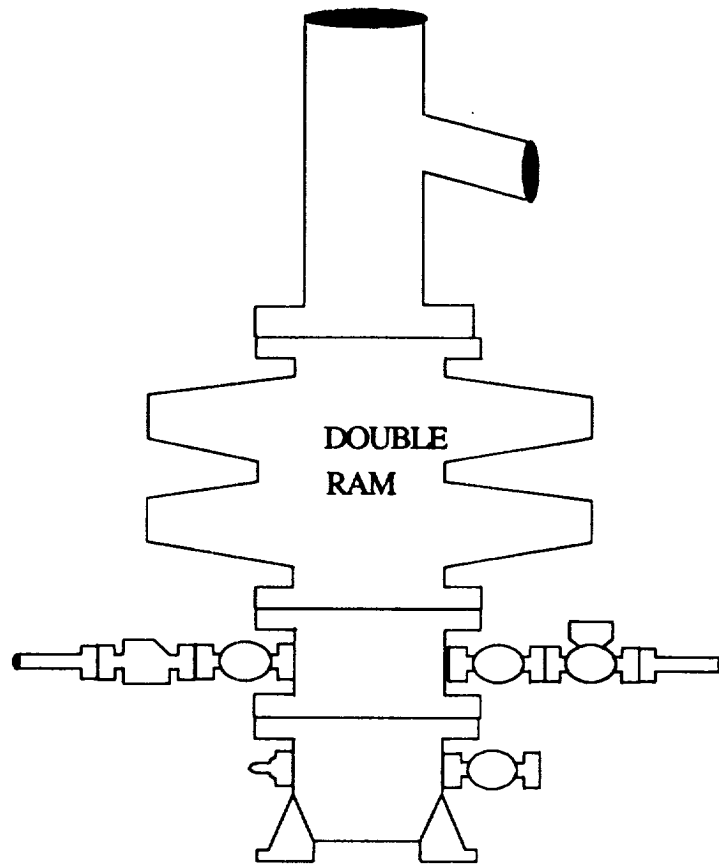
SURVEYOR CERTIFICATION

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 knowledge and belief

Date Surveyed July 12, 1989
Signature & Seal of Professional Surveyor

Certificate No. JOHN W. WEST 676
RONALD R. ELLISON 3239
NEW MEXICO
JOHN W. WEST

BOPE SCHEMATIC



Choke Manifold Requirement (3000 psi WP)

