

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87501

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

NOV 12 1992

API NO. (assigned by OCD on New Wells)

30-215-27190

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

E-2943

7. Lease Name or Unit Agreement Name

Continental State A

8. Well No.

10

9. Pool name or Wildcat

Turkey Track, 7 Rivers, Qn, GB

2. Name of Operator

Anadarko Petroleum Corporation

3. Address of Operator

P.O. Drawer 130, Artesia, New Mexico 88210

4. Well Location

Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line

Section 10 Township 19S Range 29E NMPM Eddy County

10. Proposed Depth

2400

11. Formation

7 Rivers, Queen

12. Rotary or C.T.

Rotary

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

3364 GL

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

16. Approx. Date Work will start

11/19/92

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15	10-3/4	32.75	400	5 yds redimix	Circ
12-1/4	8-5/8	24.0	300	275 sx	Circ or redimix
7-7/8	5-1/2	15.5	2400	500 sx	Circ

1. Rig up rotary tools after setting 40' of 10-3/4" conductor pipe.
2. Drill to approximately 300'; set & circulate or ready-nix cement to surface on 8-5/8" casing. Install & test Series 900 Double Ram Hydraulic Blowout Preventor.
3. Drill to T.D. (approximately 2400'); run open hole logs.
4. Run 5-1/2" casing; circulate cement.
5. Perforate Queen and/or 7 Rivers; acidize; frac.
6. Run 2-3/8" tubing, rods & bottom-hole pump; install pumping equipment and place well on production.

APPROVAL VALID FOR 180 DAYS
PERMIT EXTENDS 5/13/93
UNLESS DRILLING UNDERWAY

Per ID-1
11-20-92

New LK & API

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 Jerry E. Buckles TITLE Area Supervisor DATE 11/9/92

TYPE OR PRINT NAME Jerry E. Buckles (505) TELEPHONE NO. 677-2411

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT I

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NOV 13 1992