

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-101  
Revised 1-1-89

OIL CONSERVATION DIVISION

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

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

AUG 16 1993

C. I. D.

API NO. (assigned by OCD on New Wells)

30-015-27633

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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 ☐

MULTIPLE  
ZONE ☐

7. Lease Name or Unit Agreement Name

PATRIOT "AIZ" COM

8. Well No.

3

9. Pool name or Wildcat

N. Dagger Draw Upper Penn

4. Well Location

Unit Letter P : 760 Feet From The South Line and 660 Feet From The East Line

Section 20 Township 19 South Range 25 East NMPM Eddy County

10. Proposed Depth

8300

11. Formation

Canyon

12. Rotary or C.T.

Rotary

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

3513

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

Undesignated

16. Approx. Date Work will start

ASAP

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
14 3/4"	9 5/8"	36# J-55	1200'	1200 sacks	Circulated
8 3/4"	7"	23-26 J-55 + N-80	TD	As warranted	Circulated

Yates Petroleum Corporation proposes to drill and test the Canyon and intermediate formations. Approximately 1200' of surface casing will be set and cement circulated to shut off gravel and cavings. If commercial, production casing will be run and cemented, will perforate and stimulate as needed for production.

MUD PROGRAM: FW gel/LCM to 1200'; FW to 5000'; cut Brine to 7300'; SW gel/Starch to TD.

BOP PROGRAM: BOP's and hydrill will be installed on the 9 5/8" casing and tested daily.

IG-1  
8-20-93  
J/L + NFI

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 Beardemphl*

TITLE

LANDMAN

DATE

8/16/93

TYPE OR PRINT NAME

Ken Beardemphl

TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: N.M.O.C.D. IN SUFFICIENT  
TIME TO WITNESS CEMENTING THE  
9 5/8" CASING

APPROVAL VALID FOR 90 DAYS  
EXPIRES 10-15-93  
DATE 8-17-93  
BY [Signature]

Submit to Appropriate  
District Office  
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Fee Lease - 3 copies

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Energy, Minerals and Natural Resources Department

Form C-102  
Revised 1-1-89

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Santa Fe, New Mexico 87504-2088

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator Yates Petroleum Corporation			Lease Patriot AIZ Com		Well No. 3
Unit Letter P	Section 20	Township 19 South	Range 24 East	County Eddy County, New Mexico	NMPM
Actual Footage Location of Well: 760 feet from the South line and 660 feet from the East line					
Ground level Elev. 3513'	Producing Formation Cisco Canyon		Pool N. Dagger Draw Upper Penn		Dedicated Acreage: 160 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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, force-pooling, etc.?

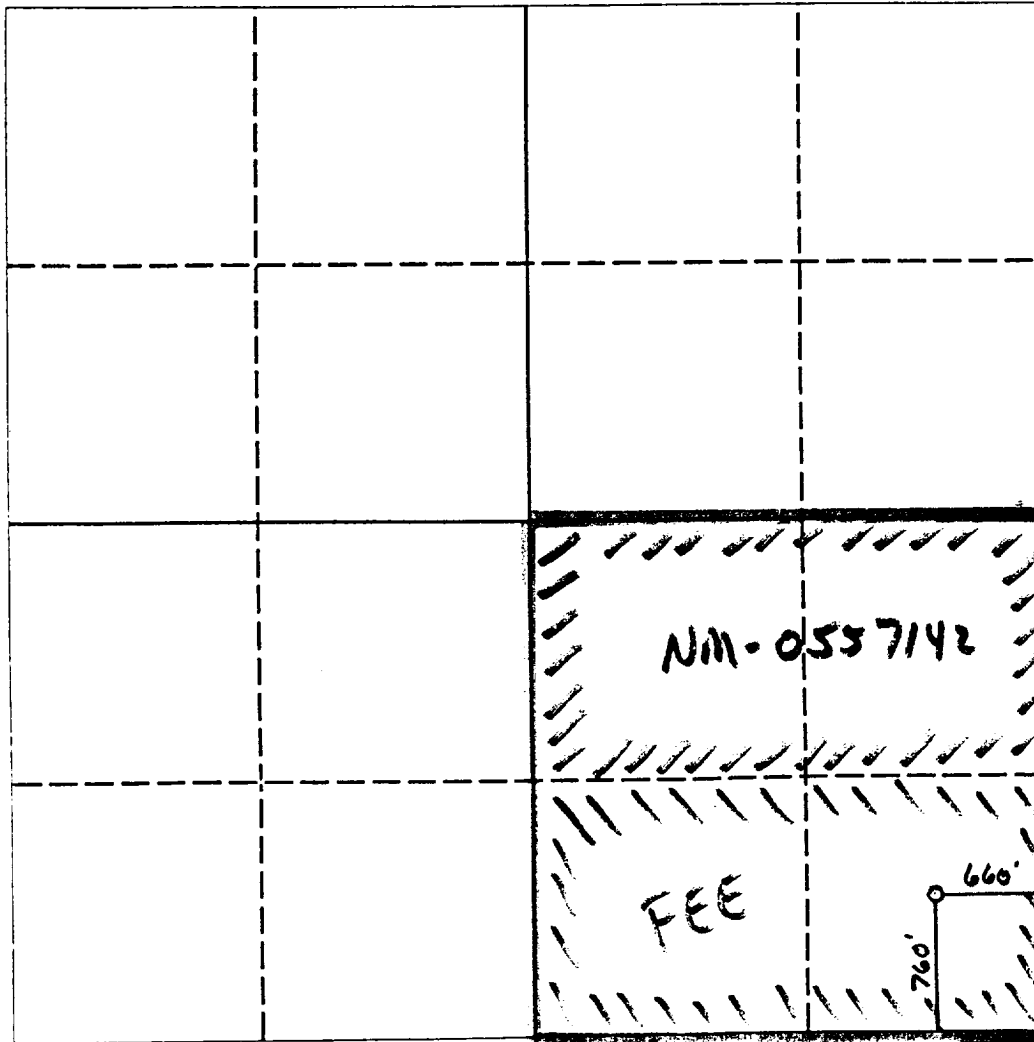
☒ Yes

☐ No

If answer is "yes" type of consolidation Communitization

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable 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

Printed Name

Position

Company

Date

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

August 16, 1993

Signature & Seal of  
Professional Surveyor

