

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

DEC 05 '96

O. C. Submit to Appropriate District Office  
ARTESIA, OFFICE

Form 101  
Revised February 10, 1994  
Instructions on back  
State Lease - 6 Copies  
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

|   |  |  |
|---|--|--|
| Operator Name and Address.<br><b>MARALO, INC.<br/>P. O. BOX 832<br/>MIDLAND, TX 79702</b> |  | <sup>2</sup> OGRID Number<br><b>014007</b>       |
| <sup>4</sup> Property Code<br><b>1959H</b>  | <sup>5</sup> Property Name<br><b>MILLMAN "3" STATE</b> | <sup>3</sup> API Number<br><b>30 - 015-28528</b> |
|   |  | <sup>6</sup> Well No.<br><b>1</b>                |

<sup>7</sup> Surface Location

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| F             | 3       | 19S      | 28E   |         | 1980          | NORTH            | 2280          | WEST           | EDDY   |

<sup>8</sup> Proposed Bottom Hole Location If Different From Surface

| UL or lot no.  | Section | Township | Range | Lot Idn | Feet from the                 | North/South line | Feet from the | East/West line | County |
|--|---------|----------|-------|---------|-------------------------------|------------------|---------------|----------------|--------|
| <sup>9</sup> Proposed Pool 1<br><b>ARTESIA (QU-GB-SA) 3230</b> |         |          |       |         | <sup>10</sup> Proposed Pool 2 |                  |               |                |        |

|  |  |  |   |  |
|--|--|--|---|--|
| <sup>11</sup> Work Type Code<br><b>P</b> | <sup>12</sup> Well Type Code<br><b>0</b>     | <sup>13</sup> Cable/Rotary<br><b>R</b>     | <sup>14</sup> Lease Type Code<br><b>S</b> | <sup>15</sup> Ground Level Elevation<br><b>3522'</b> |
| <sup>16</sup> Multiple<br><b>N</b>       | <sup>17</sup> Proposed Depth<br><b>2400'</b> | <sup>18</sup> Formation<br><b>GRAYBURG</b> | <sup>19</sup> Contractor<br><b>UNK</b>    | <sup>20</sup> Spud Date<br><b>IMMEDIATE</b>          |

<sup>21</sup> Proposed Casing and Cement Program

| Hole Size | Casing Size | Casing weight/foot | Setting Depth | Sacks of Cement | Estimated TOC |
|-----------|-------------|--------------------|---------------|-----------------|---------------|
| 17-1/2"   | 13-3/8"     | 54.5#              | 402'          | 500 SXS         | CIRC TO SURF. |
| 12-1/4"   | 8-5/8"      | 32#                | 2700'         | 1025 SXS        | 150'          |
| 7-7/8"    | 5-1/2"      | 17#                | 11148'        | 1150 SXS        | 6010'         |
|           |             |                    |               |                 |               |
|           |             |                    |               |                 |               |

<sup>22</sup> Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

SEE ATTACHED SHEET:

Notify N.M.O.C.C. in sufficient time to witness

Tags

<sup>23</sup> I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

Title:

Date:

Dorothea Logan  
DOROTHEA LOGAN

REGULATORY ANALYST

12/4/96

Phone:

(915) 684-7441

OIL CONSERVATION DIVISION

Approved by:

SUPERVISOR, DISTRICT II

Title:

Approval Date:

12-5-96

Expiration Date:

12-5-97

Conditions of Approval:

Attached ☐

# C-101 Instructions

Measurements and dimensions are to be in feet/inches. Well locations will refer to the New Mexico Principal Meridian.

IF THIS IS AN AMENDED REPORT CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT.

- |  |  |
|--|--|
| <p>1 Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.</p> <p>2 Operator's name and address</p> <p>3 API number of this well. If this is a new drill the OCD will assign the number and fill this in.</p> <p>4 Property code. If this is a new property the OCD will assign the number and fill it in.</p> <p>5 Property name that used to be called 'well name'</p> <p>6 The number of this well on the property.</p> <p>7 The surveyed location of this well New Mexico Principal Meridian NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD Unit Letter.</p> <p>8 The proposed bottom hole location of this well at TD</p> <p>9 and 10 The proposed pool(s) to which this well is being drilled.</p> <p>11 Work type code from the following table:<br/> N New well<br/> E Re-entry<br/> D Drill deeper<br/> P Plugback<br/> A Add a zone</p> <p>12 Well type code from the following table:<br/> O Single oil completion<br/> G Single gas completion<br/> M Multiple completion<br/> I Injection well<br/> S SWD well<br/> W Water supply well<br/> C Carbon dioxide well</p> <p>13 Cable or rotary drilling code<br/> C Propose to cable tool drill<br/> R Propose to rotary drill</p> <p>14 Lease type code from the following table:<br/> F Federal<br/> S State<br/> P Private<br/> N Navajo<br/> J Jicarilla<br/> U Ute<br/> I Other Indian tribe</p> <p>15 Ground level elevation above sea level</p> <p>16 Intend to multiple complete? Yes or No</p> <p>17 Proposed total depth of this well</p> | <p>18 Geologic formation at TD</p> <p>19 Name of the intended drilling company if known.</p> <p>20 Anticipated spud date.</p> <p>21 Proposed hole size ID inches, proposed casing OD inches, casing weight in pounds per foot, setting depth of the casing or depth and top of liner, proposed cementing volume, and estimated top of cement</p> <p>22 Brief description of the proposed drilling program and BOP program. Attach additional sheets if necessary.</p> <p>23 The signature, printed name, and title of the person authorized to make this report. The date this report was signed and the telephone number to call for questions about this report.</p> |
|--|--|