

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

Form C-101  
Revised February 21, 1994  
Instructions on back  
Submit to Appropriate District Office  
State Lease - 6 Copies  
Fee Lease - 5 Copies

FEB 1998 ☐ AMENDED REPORT

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

Operator Name and Address. KCS medallion Resources, Inc. 7130 South Lewis, Ste. 700 Tulsa, OK 74136		OGRID Number 161859
Property Code 23834	Property Name PDM	Well No. 1

Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
M	16	19S	29E		860'	South	660'	West	Eddy

Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
M	16	19S	29E		860'	South	660'	West	Eddy

Proposed Pool 1 Turkey Track; Morrow 86480	Proposed Pool 2
---	-----------------

Work Type Code N	Well Type Code G	Cable/Rotary Rotary	Lease Type Code State	Ground Level Elevation 3341'
Multiple No	Proposed Depth 11,500'	Formation Morrow	Contractor	Spud Date 4/1/98

Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
17 1/2"	H-40-13-5/8"	48 #	350'	550 sks	Surf
11"	J-55-8-5/8"	32 #	2800'	1160 sks	Surf
7-7/8"	N-80 4-1/2"	11.60 #	11,500'	305 sks	1500'
	S-95				

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.

Drill 350' 17-1/2" Hole. Run Cmt to Surface  
18 Hours WOC

Post ID-2  
11-6-98  
API & WOC

NSL

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:

Phone:

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Expiration Date:

Conditions of Approval:

Attached ☐

ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR

11-2-98

11-2-99

1/29/98

918-488-8283

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.

- 1 Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
- 2 Operator's name and address
- 3 API number of this well. If this is a new drill the OCD will assign the number and fill this in.
- 4 Property code. If this is a new property the OCD will assign the number and fill it in.
- 5 Property name that used to be called 'well name'
- 6 The number of this well on the property.
- 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.
- 8 The proposed bottom hole location of this well at TD

9 and 10 The proposed pool(s) to which this well is being drilled.

11 Work type code from the following table:

N	New well
E	Re-entry
D	Drill deeper
P	Plugback
A	Add a zone

12 Well type code from the following table:

O	Single oil completion
G	Single gas completion
M	Multiple completion
I	Injection well
S	SWD well
W	Water supply well
C	Carbon dioxide well

13 Cable or rotary drilling code

C	Propose to cable tool drill
R	Propose to rotary drill

14 Lease type code from the following table:

S	State
P	Private

15 Ground level elevation above sea level

16 Intend to multiple complete? Yes or No

17 Proposed total depth of this well

18 Geologic formation at TD

19 Name of the intended drilling company if known.

20 Anticipated spud date.

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

22 Brief description of the proposed drilling program and BOP program. Attach additional sheets if necessary.

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.

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88241-1980

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised February 10, 1994  
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OIL CONSERVATION DIVISION

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Santa Fe, New Mexico 87504-2088

DISTRICT IV  
P.O. Box 2088, Santa Fe, NM 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
Property Code	Property Name PDM	Well Number 1
OGRID No.	Operator Name KCS MEDALLION RESOURCES, INC.	Elevation 3341

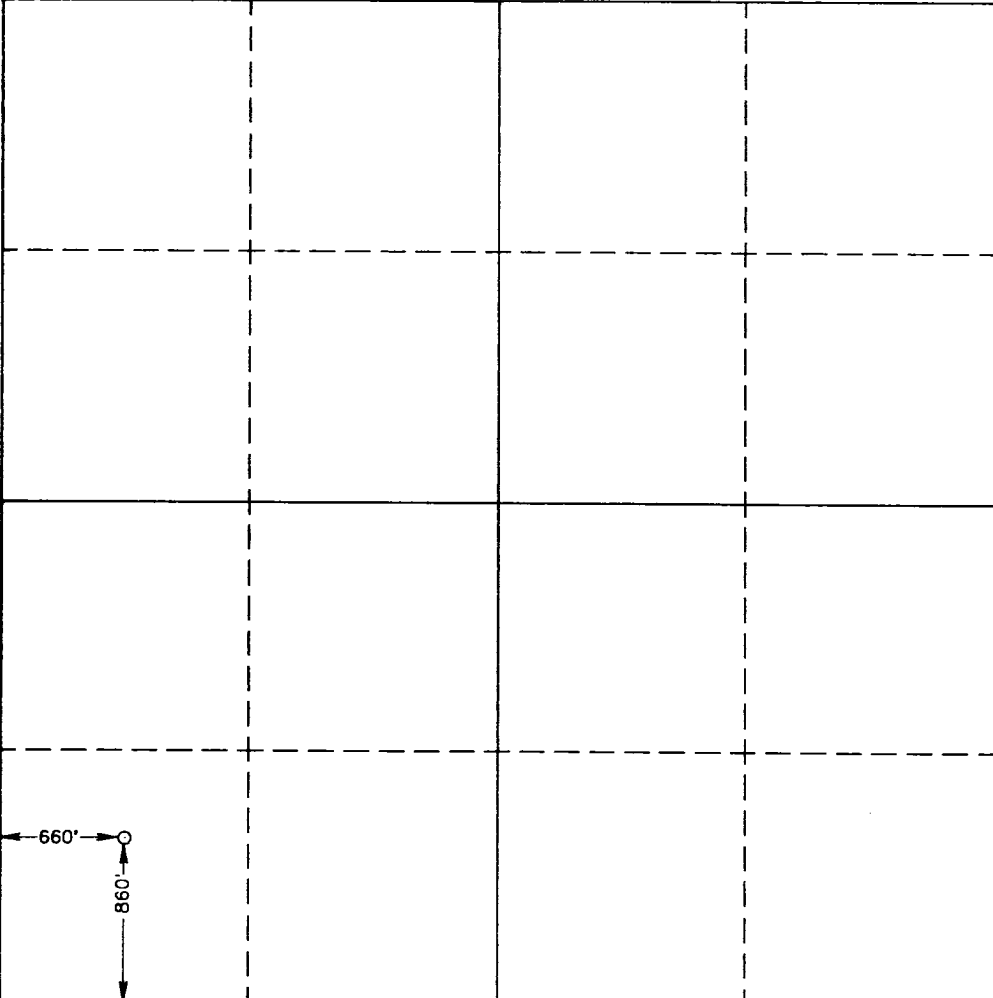
Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	16	19 S	29 E		860	SOUTH	660	WEST	EDDY

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
Dedicated Acres	Joint or Infill	Consolidation Code	Order No.						

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

					<b>OPERATOR CERTIFICATION</b>  <i>I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.</i>  Signature _____  Printed Name _____  Title _____  Date _____			
					<b>SURVEYOR CERTIFICATION</b>  <i>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 belief.</i>  DECEMBER 12, 1997  Date Surveyed _____ JLP Signature & Seal of Professional Surveyor  <i>Ronald J. Eidsen</i> 12-15-97 W.O. Num. 97-11-2011			
					Certificate No. RONALD J. EIDSON, 3239 GARY G. EIDSON, 12641 MACON McDONALD, 12185			

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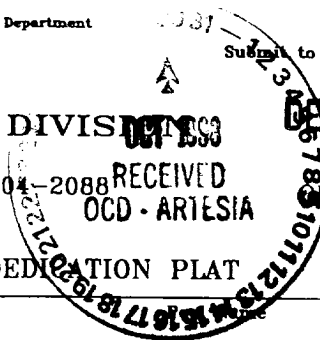
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DEC 22 1997

OPERATIONS REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-30071		Pool Code	
Property Code	Property Name PDM		Well Number 1
OGRID No.	Operator Name KCS MEDALLION RESOURCES, INC.		Elevation 3341

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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					<b>OPERATOR CERTIFICATION</b>	
					I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.	
					Signature Larry Wheat Printed Name Drig. Supt. Title 10/29/98 Date	
				<b>SURVEYOR CERTIFICATION</b>		
				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 belief.		
				DECEMBER 12, 1997		
				Date Surveyed Signature Professional Surveyor 		
				JLP 3239 W.O. Num. 97-15-97 Certificate No. RONALD J. EIDSON, 3239 RONALD J. EIDSON, 12641 RONALD J. EIDSON, 12185		