

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

API NO. (assigned by OCD on New Wells)

30-015-21650

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

LG-5699

7. Lease Name or Unit Agreement Name

MYRTLE MYRA

8. Well No.

8

9. Pool name or Wildcat

LA HUERTA DELAWARE

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 ☐

2. Name of Operator

RAY WESTALL

3. Address of Operator

P.O. BOX 4 LOCO HILLS, NM 88255

4. Well Location

Unit Letter B : 660 Feet From The NORTH Line and 1980 Feet From The EAST Line

Section 16 Township 21 SOUTH Range 27 EAST NMPM EDDY County

10. Proposed Depth

5150

11. Formation

DELAWARE

12. Reverse Unit

REVERSE UNIT

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

3248 GR

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

TR

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
7 7/8	5 1/2	15.5	5150	350 SXS	2500'

EXISTING CSNG: 13 3/8" @ 412' CMT CIRCULATED
9 5/8" @ 3000' CMT CIRCULATED

PROPOSE TO RE-ENTER TO A DEPTH OF 5150' USING A BRINE WATER SYSTEM AND A REVERSE UNIT. A SERIES 900 BOP WILL BE INSTALLED ON THE 9 5/8" PRIOR TO DRILLING INTO OPEN HOLE.

FORMERLY THE CITIES SERVICE OIL COMPANY STATE CR COM #1

OTD - 11,721

P&A - 3-19-76

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 Juanel Harden TITLE PRODUCTION CLERK DATE 05/11/93

TYPE OR PRINT NAME JUANEL HARDEN

TELEPHONE NO. 677-2370

(This space for State Use)

APPROVED BY Mark R. R. R. TITLE Geol DATE 5-17-93

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

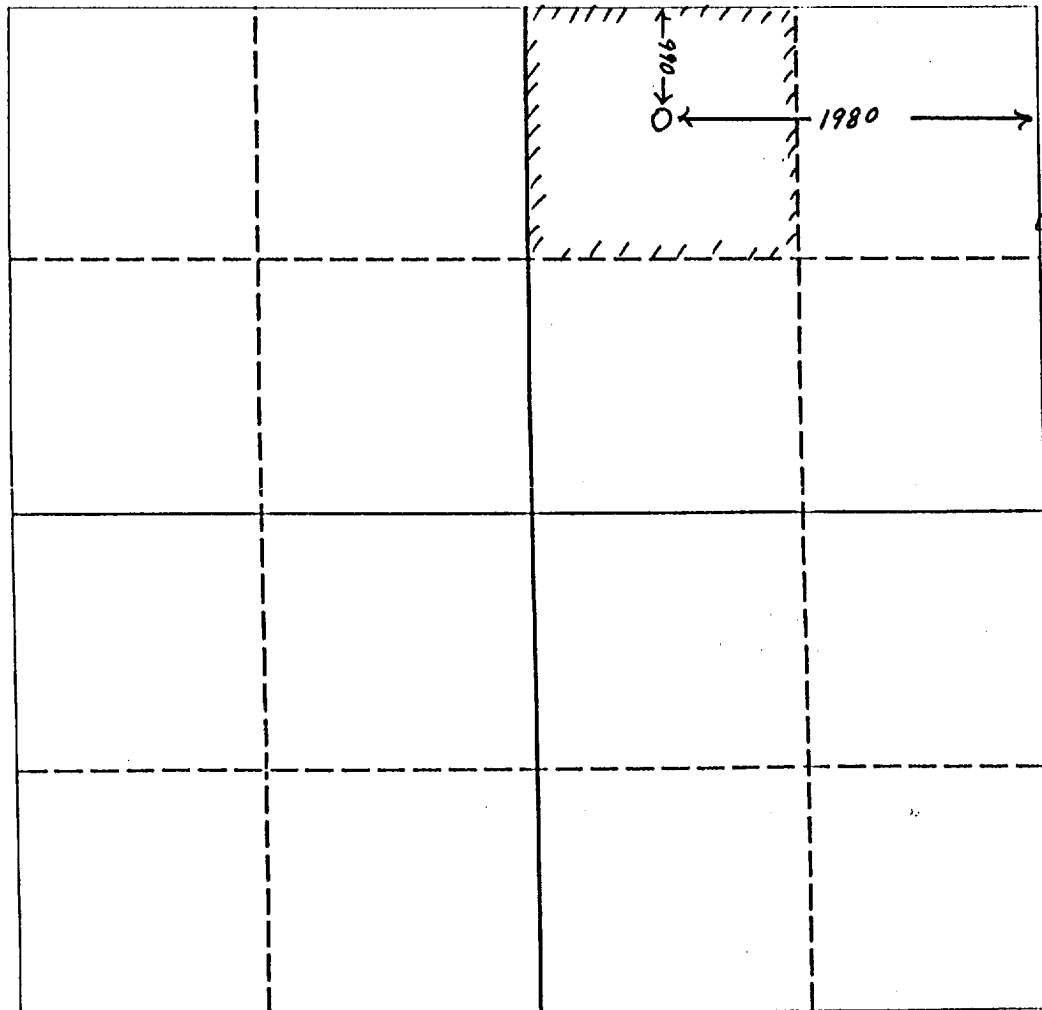
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator RAY WESTALL			Lease MYRTLE MYRA		Well No. 8
Unit Letter B	Section 16	Township 21 SOUTH	Range 27 EAST	County NM/M	EDDY
Actual Footage Location of Well: 660 feet from the NORTH line and 1980 feet from the EAST line					
Ground level Elev. 3248 GR	Producing Formation DELAWARE	Pool LA HUERTA DELAWARE	Dedicated Acreage: 40 Acres		

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communization, unitization, force-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 allowable will be assigned to the well until all interests have been consolidated (by communization, 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

Signature & Seal of
Professional Surveyor

Certificate No.

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0