

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 18 1993

C. L. D.

API NO. (assigned by OCD on New Wells)

30-015-27635

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

B 11556-5

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

Big Eddy Unit

8. Well No.

127

9. Pool name or Wildcat

Undesignated; DELAWARE

4. Well Location

Unit Letter K : 1980 Feet From The south Line and 1980 Feet From The west Line

Section 16 Township 21S Range 29E NMPM Eddy County

10. Proposed Depth

7200'

11. Formation (Delaware)

Lower Brushy Canyon Rotary

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

3389.9' GR

14. Kind & Status Plug. Bond

Blanket-Active

15. Drilling Contractor

Unknown

16. Approx. Date Work will start

When Permitted

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	11-3/4	42#	650	275	CIRCULATED
11	8-5/8	32#	3100	800	CIRCULATED
7-7/8	5-1/2	15.5#	7200	600	2600'

The blowout preventer equipment will consist of a double ram-type (3000 psi WP preventer) and an annular preventer (3000 psi WP). Units will be hydraulically operated and the ram-type will be equipped with blind rams on top and drill pipe rams on bottom. All will be installed on the 11-3/4" surface casing and used continuously until TD is reached.

Acreage is not dedicated.

IO-1
8-27-93
N:4 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 Betty Gildon TITLE Regulatory Analyst

DATE 8/16/93

TYPE OR PRINT NAME Betty Gildon

TELEPHONE NO. 915/686-3714

(This space for State Use) ORIGINAL SIGNED BY

MIKE WILLIAMS

APPROVED BY SUPERVISOR, DISTRICT II

TITLE _____ DATE 456 2 0 1993

CONDITIONS OF APPROVAL, IF ANY:

APPROVED FOR 180 DAYS
FOR 2-20-94
ON AND BY STATE

Submit to Appropriate
District Office
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Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator ENRON OIL & GAS COMPANY		Lease Big Eddy Unit		Well No. 127
Unit Letter K	Section 16	Township 21 SOUTH	Range 29 EAST NMPM	County EDDY
Actual Footage Location of Well: 1980 feet from the SOUTH line and 1980 feet from the WEST line				
Ground Level Elev. 3389.9'	Producing Formation (Delaware) Lower Brushy Canyon		Pool Undesignated	Dedicated Acreage: 40 Acres
<p>1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.</p> <p>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).</p> <p>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.? <input type="checkbox"/> Yes <input type="checkbox"/> No If answer is "yes" type of consolidation _____</p> <p>If answer is "no" list of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary. _____)</p> <p>No allowable will be assigned to the well unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.</p>				
				OPERATOR CERTIFICATION I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.
				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 3, 1993
				Signature & Seal of Professional Surveyor
				Certificate No. JOHN W. WEST 676 RONALD J. EDSON 3239 BARTON JONES 7977 93-1111452