## **D STATES** DEPARTML... OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

N.M. Oil Cons Tol Dist. 2RM APPROVED OMB NO. 1004-0136 AVENUE res: November 30, 2000

BUNEAU OF LAND MAIN	AGENEN	Artesia M	M da	Od A	
Artesia, NM (				M-045273	
la. Type of Work X DRILL	REENTER			6. If Indian, Allotee or Tribe Name	
				N/A	
lb. Type of Well 🔲 Oil Well 🕱 Gas Well 🔲 Other	<b>x</b>	Single Zone Multiple Zone		7. Unit or CA Agreement Name and No.	
2. Name of Operator				BOGLE FLATS UNIT GAS COM	
Chevron U.S.A. Inc.			8.	Lease Name and \	4.4 X /
3a. Address		3b. Phone No. (include area code)		9. API Well No.	
P.O. Box 1150 Midland, TX 79702		(915) 687-7148		30-015-32131	
4. Location of Well (Report location clearly and in accordance with	h any State eq	uirements)*	10.	Field and Pool, or	
At surface 1750' FSL & 1800' FEL UNIT J	•		<u>                                     </u>		N; UPPER PENN (GAS
At proposed prod. zone				11. Sec., T., R., M., or Blk. and Survey or Area	
14. Distance in miles and direction from nearest town or post office*				SEC. 3, T22S, R23E  12. County or Parish 13. State	
15 MILES WEST OF	CART CRAF			•	NM
15. Distance from proposed*				7. Spacing Unit dedicated to this well	
location to nearest			- Andrews	ing out dodicates	o das wen
property or lease line, ft. (Also to nearest drg. unit line, if any)		640		640	
18. Distance from proposed location*	19	Proposed Depth	20.BLM	/BIA Bond No. or	ı file
to nearest well, drilling, completed, applied for, on this lease, ft.					
applied for, on this loads, in		7600′			
Elevations (Show whether DF, KDB, RT, GL, etc.		22. Approximate date work will start* 23. Est		23. Estimated du	ration
4036′		12/15/01		4 WEEKS	
	24. A	ttachments			
The following, completed in accordance with the requirements of Ons	shore Oil and	Gas Order No. 1, shall be attack	hed to this fo	orm:	
Well plat certified by a registered surveyor.		4. Bond to cover the opera	itions unless	covered by an evi	sting bond on file (see
2. A Drilling Plan		Item 20 above).	idons unicss	covered by all ext	sting bond on the (see
3. A Surface Use Plan (if the location is on National Forest System)	Lands, the	5. Operator certification.			
SUPO shall be filed with the appropriate Forest Service Office).		6. Such other site specific authorized officer.	information	and/or plans as ma	ay be required by the
$\alpha \vee \beta \wedge \beta $		Name (Printed/Typed)		Date	
		J. K. RIPLEY			10/4/01
Title Title					
RECEULATORY O.A.					
Approved by (Signautre)	Name	Name (Printed/Typed) /S/ JOE G. LA		Date	
/S/ JOE G. LARA					DEC 0 3 2001
FIELD MANAGER	Office	CARLSBAD	FIFL	) OFFICE	_
Application approval does not warrant or certify that the applicant h	olds legal or	equitable title to those rights ir	the subject	lease which woul	d entitle the applicant to
conduct operations thereon.  Conditions of approval, if any, are attached.	-	APPROVAL FO		·	
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, mal	ke it a crime				The second secon
United States any false, fictitious or fraudulent statements or represen				make to any dep	artipent of agency of the

\*(Instructions on Reverse)

Roswell Controlled Water Basin



APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS **ATTACHED**