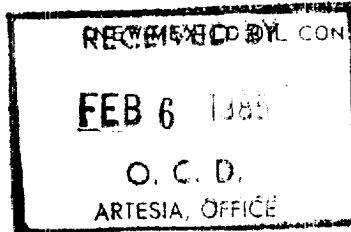


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SANTA FE	✓
FILE	✓
U.S.G.S.	✓
LAND OFFICE	✓
OPERATOR	✓



Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.
E-4205

### APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name Eddy "C" State	
2. Name of Operator Gulf Oil Corp.		9. Well No. 1	
3. Address of Operator P. O. Box 670, Hobbs, NM 88240		10. Field and Pool, or Wildcat Indian Flats Wolfcamp	
4. Location of Well UNIT LETTER F LOCATED 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE OF SEC. 2 TWP. 22S RGE. 28E NMPM		12. County Eddy	
19. Proposed Depth		19A. Formation	20. Rotary or C.T.
21. Elevations (Show whether DF, RT, etc.) 3157' GL	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start

### 23. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
7" New Csg					

POH up prod eqpt. Set cmt ret @ 8700'. Sp as necessary to P.A. Bone Springs  
to 9090'. Set Csg 2000#. Oil cmt to 9230'. Clear out to 10,250'.  
Set 4" liner @ 10,250'. cmt liner. Perf Indian Flats Wolfcamp  
10,148-71' + 9834-55'. Acz as necessary.

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.

Signed R.D. Pate Title AREA ENGINEER Date 2-4-85

(This space for State Use)  
Original Signed By  
Leslie A. Clements

APPROVED BY Supervisor District II TITLE DATE FEB 19 1985

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

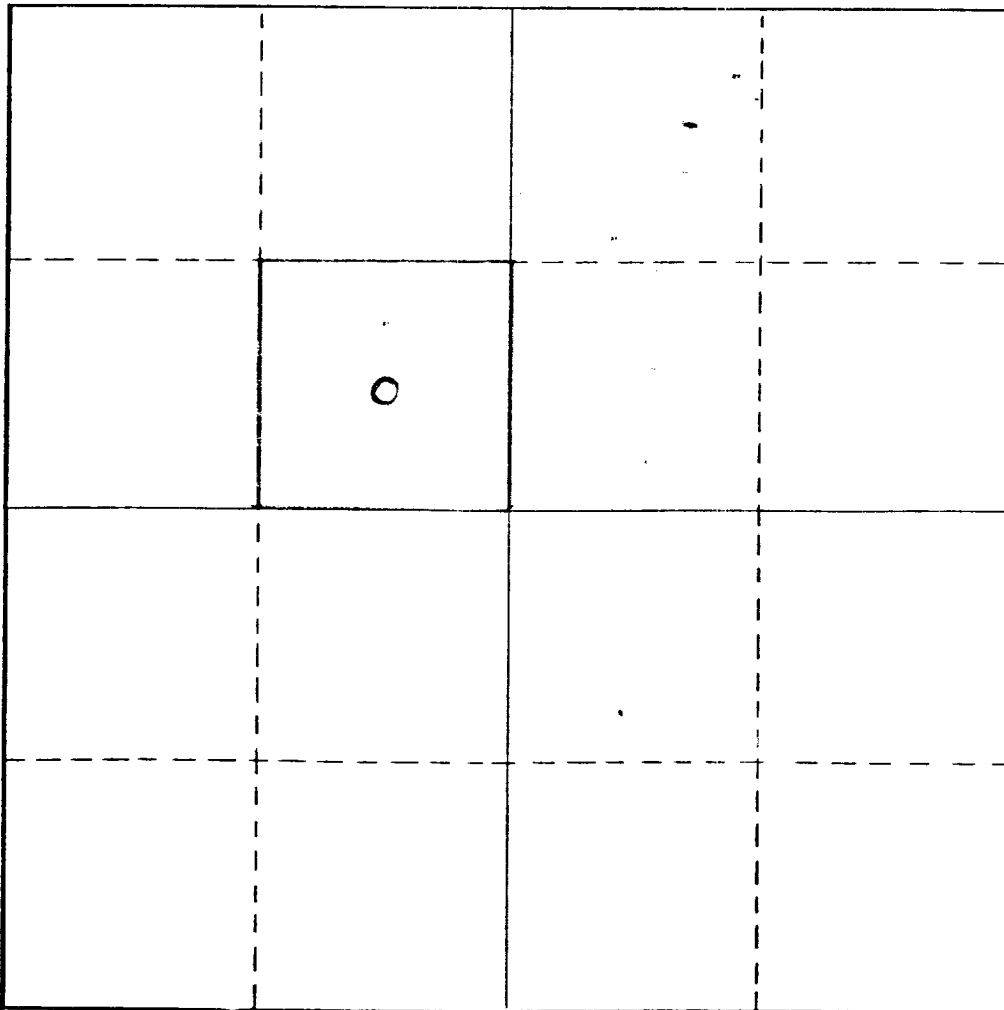
Operator <i>Gulf Oil Corp.</i>			Lease <i>Eddy "C" State</i>		Well No. <i>1</i>
Unit Letter <i>F</i>	Section <i>2</i>	Township <i>22S</i>	Range <i>28E</i>	County <i>Eddy</i>	
Actual Footage Location of Well: <i>1480</i> feet from the <i>North</i> line and <i>1780</i> feet from the <i>West</i> line					
Ground Level Elev. <i>3157</i>	Producing Formation <i>Mud. amp</i>		Foot <i>Dickens Hills Volcanic</i>	Dedicated Acreage: <i>40</i> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
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).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, 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 communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



**CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

*R.D. Pitre*

Name *R.D. PITRE*  
Position *AREA ENGINEER*  
Company *GULF OIL CORP*  
Date *2-4-85*

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 \_\_\_\_\_  
Registered Professional Engineer and/or Land Surveyor \_\_\_\_\_

Certificate No. \_\_\_\_\_

