State of New Mexico Energy, Minerals and Natural Resources Department

Form C-101 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

P.O. Box 1980, Hoods, NM 88240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

API NO. (assigned by OCD on New Wel 30-015-25191	ls)
5. Indicate Type of Lease	FEE XX

DISTRICT III 1000 Rio Brazos Rd., Azie	c, NM 87410		The state of the s	6. State Oil	& Gas Lease N	lo.
APPLICAT	ION FOR PERMIT	TO DRILL, DEEPEN, O	OR PLUG BACK	1///////		
la. Type of Work:				7. Lease Nar	ne or Unit Agr	eement Name
b. Type of Well: on. GAS WELL WELL	RE-ENTE	DEEPEN SINGLE	PLUG BACK X	Sk	een	
2. Name of Operator				8. Well No.		
Bird Creek Resources, Inc.				1		
3. Address of Operator				9. Pool name		
810 South Cir	<u>icinnati, Suite</u>	e 110 Tulsa, OK	74119	Undes. Delaware		
:	K : <u>1750</u> Feet	00.0	Line and 1980		From The We	
Section 28	Tow	nship 22-S Ra	ange 27-E	NMPM	Eddy	County (777777777777777777777777777777777777
		10. Proposed Depth		Formation		//////////////////////////////////////
		PBTD 11.		Delaware_		
13. Elevations (Show wheth	er DF RT GR etc.)	14. Kind & Status Plug. Bond			16. Approx. D	ate Work will start
3154' KB	or Dr , Kr, OK, cic.,	Blanket	Pride		6-1-92	
17.	Р	ROPOSED CASING A		RAM		
SIZE OF HOLE	SIZE OF CASING	. ,		SACKS OF	CEMENT	EST. TOP
17.5	13.375	54.5	0-242	330		Surface
12.25	10.75	45.5	0-2037	1400		Surface
9.5	7.625	29.7, 33.7	0-9076	800		6250'
6.5	5	18	8693-12,018	375		8693'

Workover to abandon Morrow, Atoka, Strawn, and Wolfcamp. Recomplete to Delaware.

- 1. MIRUPU. TOH w/ pkr. set 0 10,332'. By wireline, set 5" CIBP 0 11,160', 10,600', and 10,400'. Cap each w/ 35' cmt. Set 7 5/8" CIBP 0 8600', above liner top 0 8693'. Cap w/ 35' cmt.
- 2. Perf 4 squeeze holes @ 5510' (top of BS @ 5464'). Set cmt. rtn. @ 5410'. Squeeze holes w/ 500 sxs. cmt. and bring 7 5/8" cmt. top to 3000'. WOC.
- 3. Perf Delaware..w/2 spf 0 5266-5332'. Under pkr., acidize and frac new perfs. Test.

4. Put on pump to battery.
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 cerufy that the information above is true and complete to the best of my kno	wiedge and belief.	
SIGNATURE Brad D. Bunk	mr _ Agent	DATE5-4-92
TYPE OR PRINT NAME Brad D. Burks	918-582-3855	TELEPHONE NO.

(This space for State Use) ORIGINAL SIGNED BY
MIKE WILLIAMS

SUPERVISOR, DISTRICT II

MAY 2 0 1992

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY ...