Submit to Appropriate
District Office
State Lease – 6 copies
Fee Lease – 5 copies

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED
MAY 31 1991
O. C. D.
ARTESIA, OFFICE

Form C-101
Revised 1-1-89

API NO. (assigned by OCD on New Wells) 30-015- 26764

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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 SWD Well SINGLE ZONE ☒ MULTIPLE ZONE ☐

7. Lease Name or Unit Agreement Name
East Loving SWD

2. Name of Operator
Bird Creek Resources, Inc.

8. Well No.
1

3. Address of Operator
810 S. Cincinnati, Suite 110 Tulsa, OK 74119

9. Pool name or Wildcat
East Loving Delaware

4. Well Location
Unit Letter A : 1157 Feet From The North Line and 491 Feet From The East Line

Section 15 Township 23-S Range 28-E NMPM Eddy County

10. Proposed Depth	11. Formation	12. Rotary or C.T.
4600'	Cherry Canyon	Rotary

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
3001.1' GR	Blanket	Grace	6-15-91

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
~~12 1/4~~ 13 3/4"	10 3/4"	40.5#	0-400'	150 sxs.	Surface
9 1/2"	7"	20#	0-4600'	1100 sxs.	Surface

Refer to attached wellbore schematic.

OCD approval granted 5-22-91.

Case No. 10307.

Order No. R-9509.

Post ID-1
6-7-91
New Loc + APT

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 12/4/91
UNLESS DRILLING UNDERWAY

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 Bill M. Burks TITLE Agent DATE 5-30-91

TYPE OR PRINT NAME Bill M. Burks 918-582-3855 TELEPHONE NO.

(This space for State Use) ORIGINAL SIGNED BY
MIKE WILLIAMS
APPROVED BY SUPERVISOR, DISTRICT II TITLE DATE JUN 4 1991

CONDITIONS OF APPROVAL, IF ANY: