

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

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

OIL CONSERVATION DIVISION

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

API NO. (assigned by OCD on New Wells)

30-015-27048

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 ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

Little Bear State Unit

2. Name of Operator

Maralo Inc

8. Well No.

1

3. Address of Operator

P. O. Box 832, Midland, Texas 79702 0832

9. Pool name or Wildcat

Wildcat (Delaware)

4. Well Location

Unit Letter J : 2110 Feet From The East Line and 2460 Feet From The South Line

Section 18 Township 24S Range 25E NMPM Eddy County

10. Proposed Depth

5600'

11. Formation

Delaware

12. Rotary or C.T.

Rotary

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

4068.5

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

Unknown

16. Approx. Date Work will start

ASAP

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2	13 3/8	54.50#	550'	500 sx	Surface
12 1/4	8 5/8	32# R-55	3000'	1500 sx	Circ to Surface
7 7/8	5 1/2	15.50#	5600'	1000 sx	Circ to 8 5/8 csg

Part 10-1
7-17-92
New Lee & API

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 1-15-93
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 Hunt TITLE Agent DATE 7-14-92

TYPE OR PRINT NAME Bill Hunt TELEPHONE NO. 915/684-7441

(This space for State Use)

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

8 5/8