

N. M. Oil Cons. Division
811 C. SUBMIT IN TRIPLICATE*

FORM APPROVED

OMB NO. 1004-0136

Expires: February 28, 1995

Form 3160-3
July 1982)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

ARTESIA, NM 87003-0004
(Other instructions on reverse side)

APPLICATION FOR PERMIT TO DRILL OR DEEPEN

1a. TYPE OF WORK
DRILL ☒ DEEPEN ☐

1b. TYPE OF WELL
OIL ☐ GAS ☒
WELL WELL OTHER ZONE SINGLE ☒ MULTIPLE ☐
ZONE ZONE

2. NAME OF OPERATOR
Gothic Production Company, c/o J.O. Easley, Inc. 169680

3. ADDRESS AND TELEPHONE NO.
P.O. Box 2691, Roswell, NM 88202-2691

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
1980'FEL & 660'FNL

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE
Unit B
10 miles northeast of Roswell, NM

15. DISTANCE FROM PROPOSED LOCATION TO NEAREST PROPERTY OR LEASE LINE, T.O. (Also to nearest drg. unit line, if any) 660'
16. NO. OF ACRES IN LEASE 680.0 acres
17. NO. OF ACRES ASSIGNED TO THIS WELL 160.0 acres

18. DISTANCE FROM PROPOSED LOCATION TO NEAREST WELL, DRILLING COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 1300'
19. PROPOSED DEPTH 4,100'
20. ROTARY OR CABLE TOOLS Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.) 3556'
22. APPROX. DATE WORK WILL START ASAP

PROPOSED CASING AND CEMENTING PROGRAM				
SIZE OF HOLE	GRADE, SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17-1/2"	13-3/8"	48#	40'	Circulate to surface
12-1/4"	8-5/8"	24#	900'	550 sxs "
7-7/8"	4-1/2"	10.5#	4100'	475 sxs

Duration of Program: Drilling - Ten (10)
Completion - Nine (9)
See attached for complete Drilling Program

The undersigned accepts all applicable terms, conditions, stipulations, and restrictions concerning operations conducted on the leased land or portions thereof, as described.

EXHIBITS

Exhibit "A": Drilling Program
Exhibit "B": Surface Use Plan
Exhibit "C": Land Survey Plat

Exhibit "D": Location Plat
Exhibit "E": Existing Well Plat
Exhibit "F": Rig Layout

Exhibit "G": BOP Program

IN ABOVE SPACE, DESCRIBE PROPOSED PROGRAM:

If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout prevention program, if any.

SIGNED [Signature] TITLE Agent/Gothic Prod. Corp. DATE 1/19/99

PERMIT No. _____ APPROVAL DATE _____

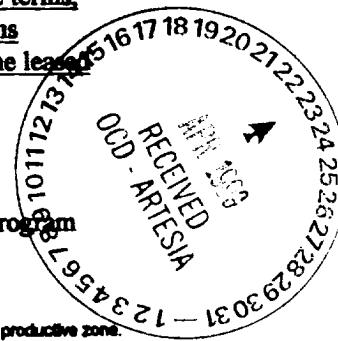
Application approval does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY 1st Gary A. Stephens TITLE Assistant Field Office Manager DATE 4-21-99

*See Instructions On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.



1999

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District I
PO Box 1906, Hobbs, NM 88241-1906
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 1088, Santa Fe, NM 87504-1088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102

Revised February 10, 1994

Instructions on back

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number		Pool Code		Pool Name Pecos Slope Abo	
Property Code	Property Name SU Federal			Well Number #2	
OGRID No.	Operator Name Gothic Production Corp.			Elevation 3556	

10 Surface Location

UL or lot no. B	Section 10	Township 9	Range 25	Lot Idn	Feet from the 660	North/South line North	Feet from the 1980	East/West line East	County Chaves
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11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 160.0		Joint or In/In		Consolidation Code		Order No.			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16						17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Signature James L. Schultz Printed Name Agent/Gothic Prod. Corp. Title 1/19/99 Date
						18 SURVEYOR CERTIFICATION 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 belief. Date of Survey 12/17 Signature and Seal of Professional Surveyor: ROBERT F. VISAGE REGISTERED PROFESSIONAL SURVEYOR Certificate Number

