

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING
OFFICE FOR NUMBER
OF COPIES REQUIRED
(Other instructions on
reverse side)

30-015-27272 c/sf
BLM Roswell District
Modified Form No.
MD60-3160-2

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☒

2. NAME OF OPERATOR

KELTON OPERATING CORPORATION

3a. Area Code & Phone No.
505-622-2421

3. ADDRESS OF OPERATOR

P.O. Box 3090 Roswell, New Mexico 88202-3090

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface

2310' FSL & 1650' FEL
At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

Approximately 7 miles South east of Artesia

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drg. unit line, if any)

1650'

16. NO. OF ACRES IN LEASE

40

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

5700'

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3467'

22. APPROX. DATE WORK WILL START*

12-15-92

PROPOSED CASING AND CEMENTING PROGRAM

HOLE SIZE	CASING SIZE	WEIGHT/FOOT	GRADE	THREAD TYPE	SETTING DEPTH	QUANTITY OF CEMENT
12 1/2"	8 5/8"	24#	K-55	8 rd	350'	200 sxs circ.
7 7/8"	5 1/2"	15.50#	J-55	8 rd	5700'	1150 sxs circ.

MUD PROGRAM

0' - 350' - Fresh water/spud mud
350' - 1100' - Fresh water
1100' - 5700' - Cut brine

BOP PROGRAM

Will install BOP on 8 5/8" casing. Pressure test before drill out and test daily for operational.

EXP INT 2-19-96 30-015-27272

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

24.

SIGNATURE C. Dale Kelton

TITLE President

DATE 11-18-92

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

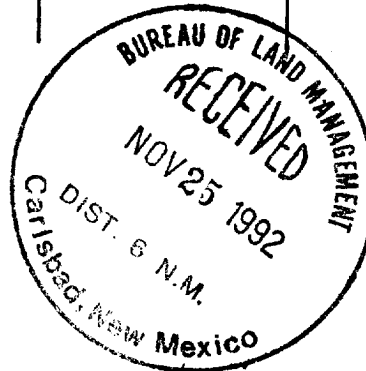
TITLE

DATE 1-12-93

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS
ATTACHED

*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



27272-210-03 2P-91-2 HAT 9x3

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

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

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

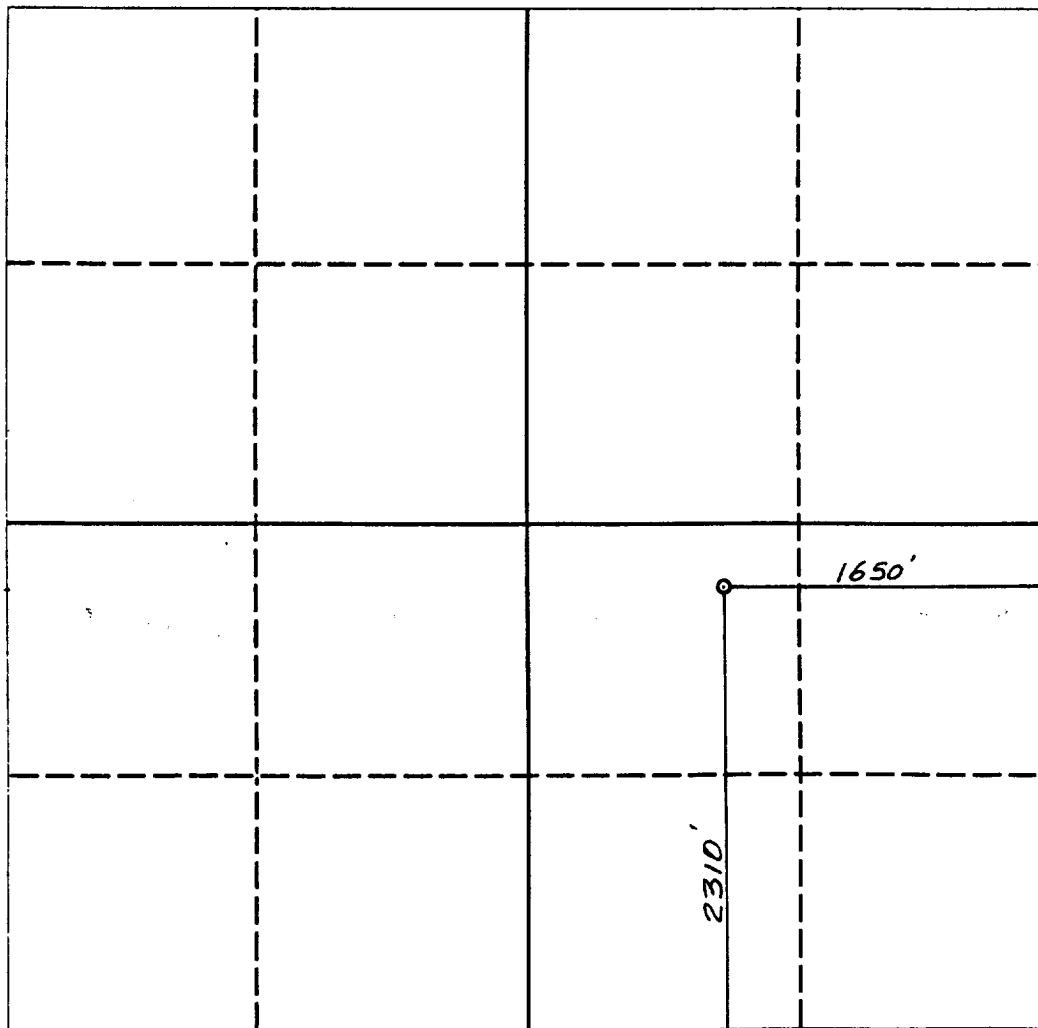
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator KELTON OPERATING CORPORATION			Lease BONAT FEDERAL		Well No. 1
Unit Letter J	Section 8	Township 18 SOUTH	Range 27 EAST	County EDDY COUNTY, NM	
Actual Footage Location of Well: 1650 feet from the EAST line and 2310 feet from the SOUTH line					
Ground level Elev. 3467	Producing Formation		Pool Multiple - Abo Reef		Dedicated Acreage: 40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure 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 interest 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 interest, has been approved by the Division.



0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0

OPERATOR CERTIFICATION

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

Signature
C. Dale Kelton
Printed Name
C. Dale Kelton
Position
President
Company
Kelton Operating Corporation
Date
November 18, 1992

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 knowledge and belief.

Date Surveyed
NOVEMBER 9, 1992
Signature of State Engineer
Professional Surveyor
NEW MEXICO
REGISTERED SURVEYOR
ENGINEER
NO. 3412
PROFESSIONAL

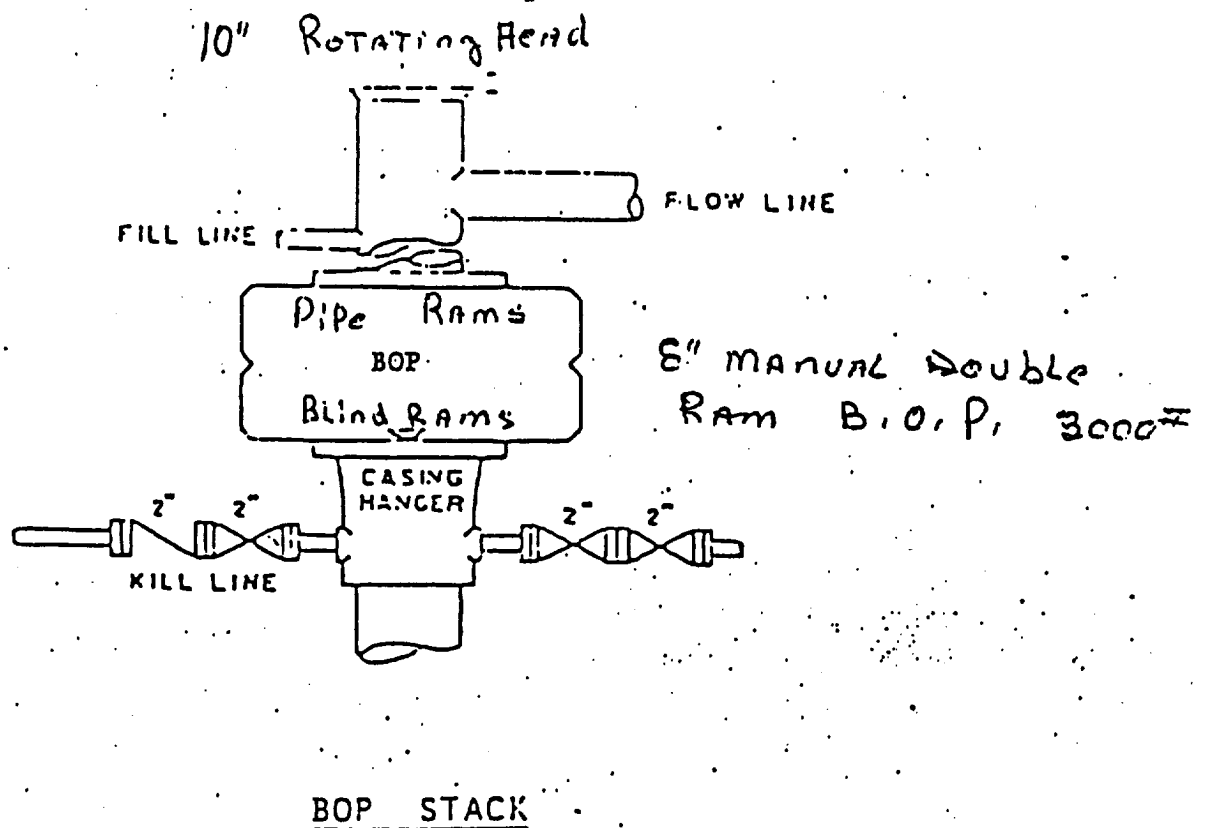
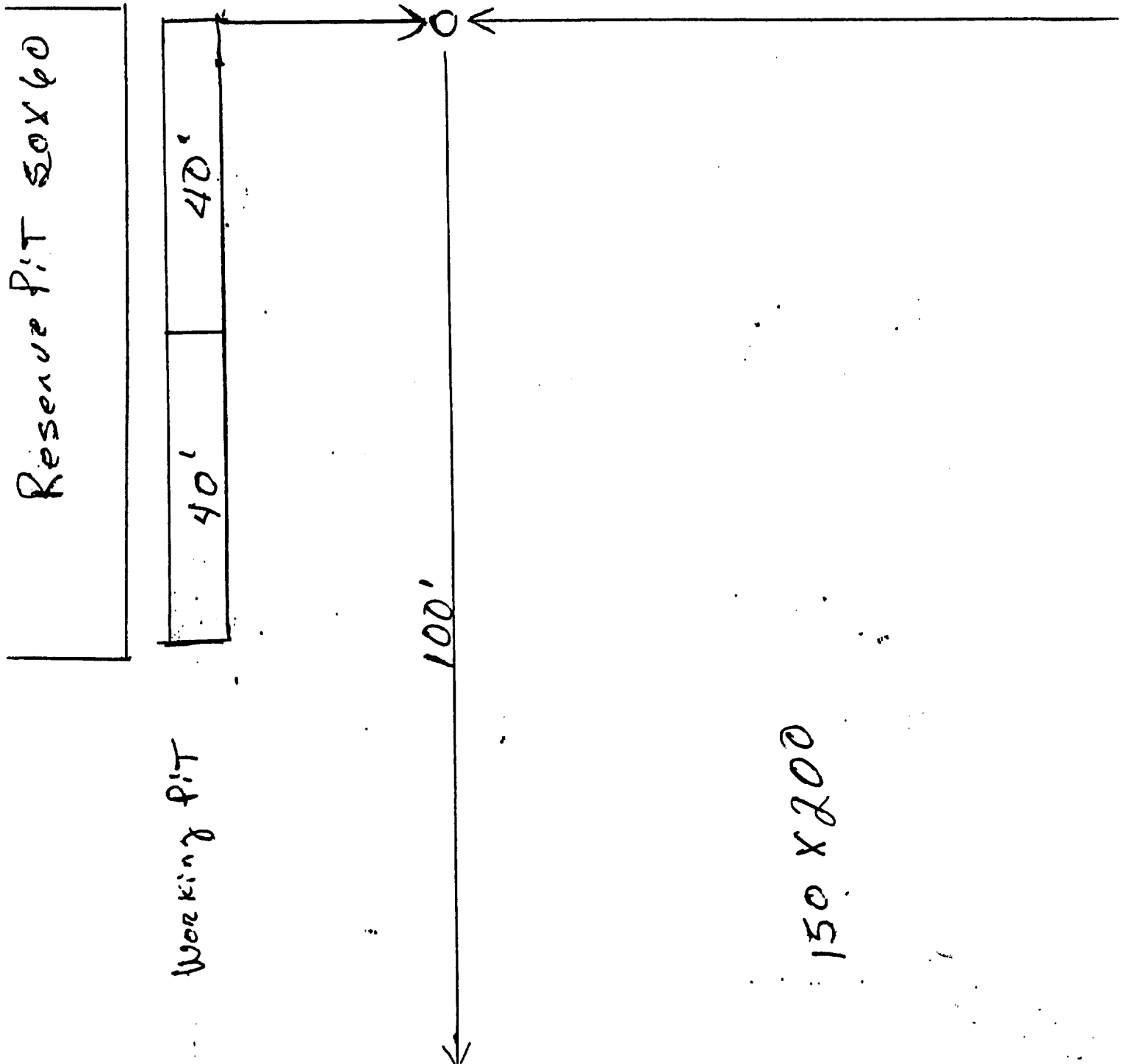


EXHIBIT "D"

KELTON OPERATING CORPORATION
 BONAT FEDERAL NO. 1
 BOP DIAGRAM

EXHIBIT "C"

KELTON OPERATING CORPORATION
BONAT FEDERAL NO. 1
RIG LAYOUT



150 x 200