

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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
Rogo Producing Company
3. ADDRESS OF OPERATOR
P.O. Box 10340, Midland, Texas 79702
4. LOCATION OF WELL (Report location clearly and in accordance with any State Regulations*)
At surface 1650' FSL & 1980' FEL of Section 35, T-23S, R-31E
At proposed prod. zone Same
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
30 miles east of Carlsbad, New Mexico
10. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drilg. unit line, if any) 1650'
16. NO. OF ACRES IN LEASE 640
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. 1320'
19. PROPOSED DEPTH 8700'
20. ROTARY OR CABLE TOOLS Rotary
21. ELEVATIONS (Show whether DF, RT, GR, etc.) 3508.5' Ground Level
22. APPROX. DATE WORK WILL START* Upon approval of application

PROPOSED CASING AND CEMENTING PROGRAM				Secretary's Potash
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17 1/2"	13 3/8"	54.5#	850'	Sufficient to Circulate
11 1/2"	8 5/8"	32#	4500'	Sufficient to Circulate
7 7/8"	5 1/2"	17#	8700'	1200 sx (tie back)

After setting production casing, pay zone will be perforated and stimulated as necessary.

See attached for: Supplemental Drilling Data
BOP Sketch
Surface Use and Operations Plan

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. SIGNED James M.C. Ritchie, Jr. TITLE Agent DATE July 20, 1993
(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____
APPROVED BY William C. Collins DATE 6-17-94
CONDITIONS OF APPROVAL, IF ANY: _____

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 United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Form C-102
Revised 1-1-89

All Distances must be from the outer boundaries of the section

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).

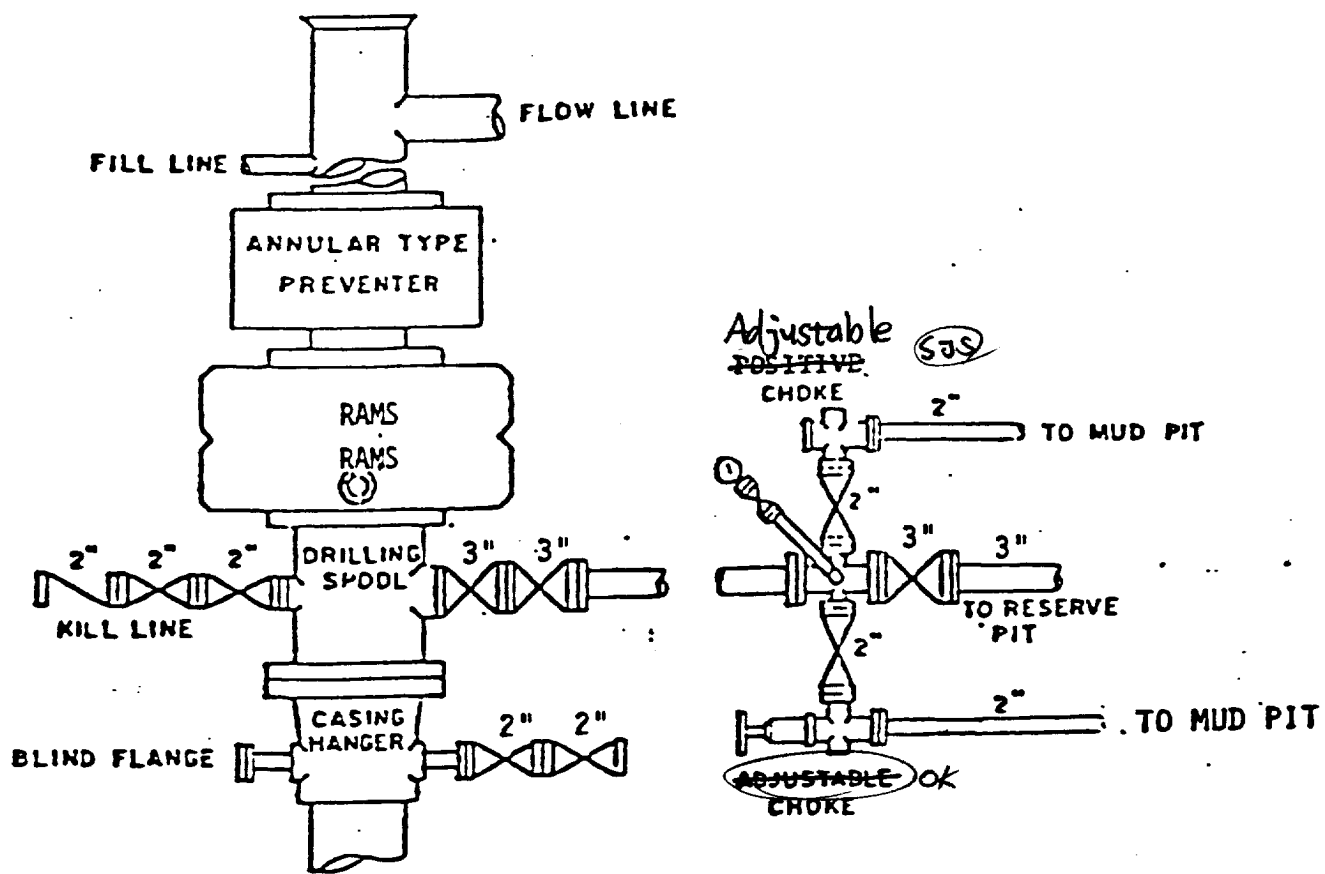
3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

☐ Yes ☐ No If answer is "yes" type of consolidation _____

If answer is "no" list of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary. _____)

No allowable well be assigned to the well unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.

	OPERATOR CERTIFICATION	
	<i>I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.</i>	
	Signature <i>James M.C. Ritchie, Jr.</i> James M.C. Ritchie, Jr.	
	Printed Name Agent	
	Position Roop Producing Company	
	Company July 20, 1993	
	Date	
	SURVEYOR CERTIFICATION	
	<i>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.</i>	
	Date Surveyed MAY 19, 1993	
Signature & Seal of Professional Surveyor <div style="text-align: center;"> </div>		
Certificate No. JOHN W. WEST. 676 RONALD J. EDSON. 8239 CARY L. JONES. 7877		
93-41-0845		



BOP STACK

3000 PSI WORKING PRESSURE

BOP ARRANGEMENT