District I 1625 N. French Dr., Flobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 District II

811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District III
1000 Rio Brazos Road, Aztec, NM 87410

Phone: (505) 334-6178 Fax: (505) 334-6170 District IY 1220 S. St. Francis Dr., Santa Fe. NM 87505

Phone: (505) 476-3460 Fax: (505) 476-3462

HOBBS OCD

## State of New Mexico

Form C-101 Revised November 14, 2012

**Energy Minerals and Natural Resources** 

FEB 1 2 2013

Oil Conservation Division 1220 South St. Francis Dr. ☐AMENDED REPORT

RECEIVED

Santa Fe, NM 87505

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE OGRID Number Operator Name and Address PO Box 210 Regeneration Energy Corp. 280240 Actesia, NM 88211-0210 7. Surface Location UL - Lot Township 235 Feet from N/S Line Feet From E/W Line County Section Lot Idn 34 E K 24 1980 1980 South West rea <sup>8</sup> Proposed Bottom Hole Location UL - Lot Section Township Range Lot Idn Feet from N/S Line Feet From E/W Line County 9. Pool Information Pool Name Pool Code ¿ Delaware 5W D 9618 Additional Well Information 14. Lease Type 12 Well Type Ground Level Elevation 3372 6 R Work Type 13. Cable/Rotary E 19. Contractor Multiple Proposed Depth 18. Formation O. Spud Date N Depth to Ground water Distance to nearest surface water Distance from nearest fresh water well 21. Proposed Casing and Cement Program Estimated TOC Casing Weight/ft Setting Depth Sacks of Cement Type Hole Size Casing Size 20" 94# 73 q 1325 13 3/8" 17/2" 2900 68# 5130 7" 39# 7900 950 rod 17.44" Xistiru Casing/Cement Program: Additional Comments 22. Proposed Blowout Prevention Program Туре Working Pressure Manufacturer 3000 Manual 30*0*0 PS: P8, Townsend 21. I hereby certify that the information given above is true and complete to the OIL CONSERVATION DIVISION best of my knowledge and belief. I further certify that I have complied with 19.15.14.9 (A) NMAC \( \square\) and/or Approved By: 19.15.14.9 (B) NMAC □, if applicable. Signature: Petreieum Enginesi Printed name: Title: Title: ha-dman Expiration Date: Approved Date E-mail Address: FFB

Conditions of Approval Attached