

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-8161 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 Rd., Aztec, NM 87410
Phone:(505) 334-8178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3482

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Form C-101
August 1, 2011
Permit 229383

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

1. Operator Name and Address RILEY EXPLORATION OPERATING COMPANY, LLC 2008 N. Council Blanchard, OK 73010		2. OGRID Number 371599
4. Property Code 317309		3. API Number 30-025-43558
5. Property Name PIPER 2 STATE		6. Well No. 001

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
D	2	19S	37E	D	330	N	330	W	Lea

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
D	2	19S	37E	D	330	N	330	W	Lea

9. Pool Information

WC-025 G-06 S193702D;DEVONIAN	98222
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Additional Well Information

11. Work Type New Well	12. Well Type OIL	13. Cable/Rotary	14. Lease Type State	15. Ground Level Elevation 3668
16. Multiple N	17. Proposed Depth 10000	18. Formation Devonian	19. Contractor	20. Spud Date 2/20/2016
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

☒ We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	12.25	9.625	36	1600	800	0
Prod	8.75	7	32	10000	1100	0

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Hydri	3000	3000	
Double Ram	5000	5000	

23. I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify I have complied with 19.15.14.9 (A) NMAC <input checked="" type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input type="checkbox"/> , if applicable. Signature: _____ Printed Name: Electronically filed by Laura A Winkler Title: Regulatory Compliance Specialist Email Address: laurawinkler@rileyexploration.com Date: 1/25/2017 Phone: 405-485-8200	OIL CONSERVATION DIVISION Approved By: Paul Kautz Title: Geologist Approved Date: 1/25/2017 Expiration Date: 1/25/2019 Conditions of Approval Attached
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State of New Mexico
Energy, Minerals & Natural Resources
Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Sante Fe, NM 87505

FORM C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number		² Pool Code		³ Pool Name					
⁴ Property Code		⁵ Property Name PIPER 2						⁶ Well Number #1	
⁷ OGRID No.		⁸ Operator Name RILEY EXPLORATION						⁹ Elevation 3668'	
¹⁰ Surface Location									
UL or lot no. D	Section 2	Township 19-S	Range 37-E	Lot Idn -	Feet from the 330'	North/South line NORTH	Feet from the 330'	East/West line WEST	County LEA
UL or lot no. -	Section -	Township -	Range -	Lot Idn -	Feet from the -	North/South line -	Feet from the -	East/West line -	County -
¹² Dedicated Acres 42.16		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ 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		SURFACE LOCATION NEW MEXICO EAST NAD 1927 X=838693 Y=618566 LAT.: N 32.6956747 LONG.: W 103.2291416		¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or released mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. Signature _____ Date _____ Printed Name Laura Winkler E-mail Address laurawinkler@rileyexploration.com	
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 to the best of my belief. Date of Survey 01/08/2017 Signature of Registered Surveyor Certificate Number _____					

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Santa Fe, NM 87505

Form APD Comments

Permit 229383

PERMIT COMMENTS

Operator Name and Address: RILEY EXPLORATION OPERATING COMPANY, LLC [371599] 2008 N. Council Blanchard, OK 73010		API Number: 30-025-43558
		Well: PIPER 2 STATE #001

Created By	Comment	Comment Date
LWINKLER	This is Riley's first APD to submit, so if there are any changes or corrections that need to be made, please let us know and we'll gladly fix anything we need. Thank you, Laura Winkler	1/25/2017
LWINKLER	Regarding 19.15.14.9 A. & B. - This well is not located within a city, town, or village and there are no other operators in the quarter-quarter section of what we're drilling. Therefore, notice was not given to any city or operators. If something else differs, please let us know.	1/25/2017

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Form APD Conditions

Permit 229383

PERMIT CONDITIONS OF APPROVAL

Operator Name and Address: RILEY EXPLORATION OPERATING COMPANY, LLC [371599] 2008 N. Council Blanchard, OK 73010	API Number: 30-025-43558
	Well: PIPER 2 STATE #001

OCD Reviewer	Condition
pkautz	Will require a deviation survey with the C-104
pkautz	SURFACE & PRODUCTION CASING - Cement must circulate to surface
pkautz	If cement does not circulate to surface, must run temperature survey or other log to determine top of cement
pkautz	Surface casing must be set 25' below top of Rustler Anhydrite in order to seal off protectable water
pkautz	Operator shall notify appropriate District office when setting conductor pipe.
pkautz	The Operator is to notify NMOCDD by sundry (Form C-103) within ten (10) days of spudding a well.
pkautz	It is the operator's responsibility to monitor cancellation dates of approved APDs.
pkautz	If an APD expires and if site construction has occurred, site remediation is required.
pkautz	Must notify OCD Hobbs Office if lost circulation is encountered at 575-370-3186
pkautz	Must notify OCD Hobbs Office of any water flows in the Salado Formation at 575-370-3186. Report depth and flow rate
pkautz	1) Must notify OCD Hobbs Office prior to running Stage Tool at 575-370-3186 2) If using Stage Tool on Surface casing, Stage Tool must be set greater than 350' from surface and a minimum of 200 feet above surface shoe. 3) When using a Stage Tool on Intermediate or Production Casing Stage must be a minimum of 50 feet below previous casing shoe.
pkautz	Submit Gas Capture Plan form prior to spudding or initiating recompletion operations