

District I1625 N. French Dr., Hobbs, 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 Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170**District IV**1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

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 231004

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

1. Operator Name and Address CAZA OPERATING, LLC 200 N LORAIN MIDLAND, TX 79701		2. OGRID Number 249099
4. Property Code 39924		3. API Number 30015 44042
5. Property Name MAD RIVER 13 STATE COM		6. Well No. 004H

7. Surface Location

UL - Lot I	Section 13	Township 24S	Range 27E	Lot Idn I	Feet From 1987	N/S Line S	Feet From 100	E/W Line E	County Eddy
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8. Proposed Bottom Hole Location

UL - Lot L	Section 13	Township 24S	Range 27E	Lot Idn L	Feet From 1948	N/S Line S	Feet From 330	E/W Line W	County Eddy
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9. Pool Information

BLACK RIVER; WOLFCAMP, EAST (G)	97442
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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 3090
16. Multiple N	17. Proposed Depth 14055	18. Formation Wolfcamp	19. Contractor	20. Spud Date 2/15/2017
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	17.5	13.375	54.5	730	505	0
Int1	12.25	9.625	40	3900	1005	0
Int1	12.25	9.625	40	5922	775	3900
Prod	8.75	5.5	20	14055	2780	0

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Annular	5000	5000	Schaffer
Double Ram	5000	5000	Schaffer

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 checked="" type="checkbox"/> if applicable.		OIL CONSERVATION DIVISION	
Signature:		Approved By: <i>Boyd</i>	
Printed Name: Electronically filed by Steve Morris		Title: <i>DI SUPERVISOR</i>	
Email Address: steve.morris@mojoenergy.com		Approved Date: <i>01/24/2017</i> Expiration Date: <i>01/24/2019</i>	
Date: 1/19/2017	Phone: 972-835-3315	Conditions of Approval Attached	

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Form C-102

August 1, 2011

Permit 231004

WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30015 44042	2. Pool Code 97442	3. Pool Name BLACK RIVER; WOLFCAMP, EAST (G)
4. Property Code 39924	5. Property Name MAD RIVER 13 STATE COM	6. Well No. 004H
7. OGRID No. 249099	8. Operator Name CAZA OPERATING, LLC	9. Elevation 3090

10. Surface Location

UL - Lot I	Section 13	Township 24S	Range 27E	Lot Idn I	Feet From 1987	N/S Line S	Feet From 100	E/W Line E	County Eddy
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11. Bottom Hole Location If Different From Surface

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
12. Dedicated Acres 160.00	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

	OPERATOR CERTIFICATION
	<p><i>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 unleased mineral interest in the land including the proposed bottom hole location(s) 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.</i></p> <p>E-Signed By: Steve Morris</p> <p>Title:</p> <p>Date: 1/19/2017</p>
	SURVEYOR CERTIFICATION
	<p><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 belief.</i></p> <p>Surveyed By: Ronald Eidson</p> <p>Date of Survey: 12/13/2016</p> <p>Certificate Number: 3239</p>