

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

File	☒
BLM	☒
Land Office	☒
B of M	☒
Operator	☒

Form C-101
Revised 1-1-89

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

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

MAY 24 '89

API NO. (assigned by OCD on New Wells) <u>30-015-62203</u>	
5. Indicate Type of Lease STATE ☒ FEE ☐	
6. State Oil & Gas Lease No. LG-6684	
7. Lease Name or Unit Agreement Name Trellis AGP State	
8. Well No. 1	
9. Pool name or Wildcat UN West Pecos Slope Abo	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work: DRILL ☒ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☐					
b. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐					
2. Name of Operator Yates Petroleum Corporation					
3. Address of Operator 105 South Fourth Street, Artesia, NM 88210					
4. Well Location Unit Letter <u>I</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>16</u> Township <u>8S</u> Range <u>23E</u> NMPM Chaves County					
10. Proposed Depth 3500'		11. Formation Abo			
12. Rotary or C.T. Rotary		13. Elevations (Show whether DF, RT, GR, etc.) 3967.5'			
14. Kind & Status Plug. Bond Blanket		15. Drilling Contractor Undesignated			
16. Approx. Date Work will start ASAP		17. PROPOSED CASING AND CEMENT PROGRAM			
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4"	8 5/8"	24# J-55	Approx. 1200'	1200 sacks	Circulate
7 7/8"	4 1/2"	9.5# J-55	TD	350 sacks	

We propose to drill and test the Abo and intermediate formations. Approximately 1200' of surface casing will be set and cement circulated. If commercial, production casing will be run and cemented with adequate cover, perforated and stimulated as needed for production.

MUD PROGRAM: FW Gel/LCM to 1200', cut brine 2700', Starch/Drispak to TD.

BOP PROGRAM: BOP will be installed at the offset and tested daily

GAS NOT DEDICATED

POST ID-1
NLR API
5-26-89

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 11/24/89
UNLESS DRILLING UNDERWAY

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. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Clifton R. May TITLE Permit Agent DATE 5/24/89
TYPE OR PRINT NAME Clifton R. May TELEPHONE NO. 748-1471

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE MAY 25 1989

CONDITIONS OF APPROVAL, IF ANY:

856
SUFFICIENT
CEMENTING THE
CASING

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

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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

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator Yates Petroleum Corporation			Lease Trellis AGP State		Well No. 1
Unit Letter I	Section 16	Township 8S	Range 23E	County NMPM	Chaves
Actual Footage Location of Well: 1980 feet from the South line and 660 feet from the East line					
Ground level Elev. 3967.5'		Producing Formation Abo		Pool W. PACE SLOPE Abo	Dedicated Acreage: 160 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.

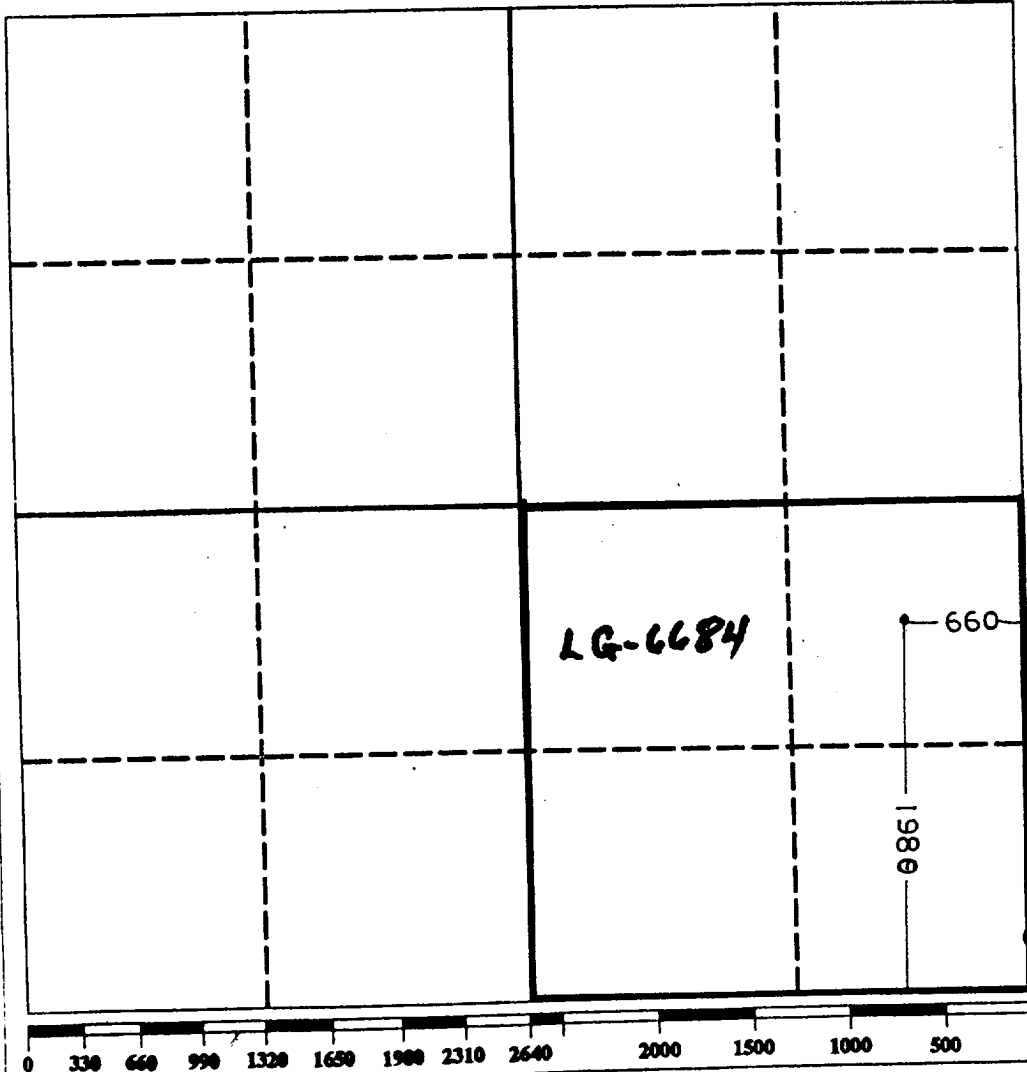
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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.



OPERATOR CERTIFICATION

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

Signature
Clifton R. May

Printed Name
Clifton R. May

Position
Permit Agent

Company
Yates Petroleum Corporation

Date
May 24, 1989

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
May 23, 1989

Signature & Seal of
Professional Surveyor

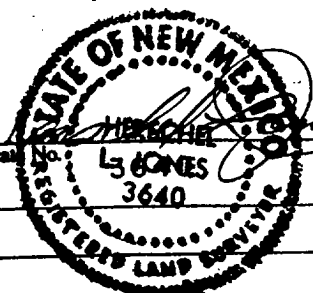


EXHIBIT B

