

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

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

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

JAN 11 '90

API NO. (assigned by OCD on New Wells)

30-005-62756

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V - 2328

7. Lease Name or Unit Agreement Name

Bittersweet Unit

8. Well No.

1

9. Pool name or Wildcat

Wildcat Ordovician

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

ARTESIA, OFFICE

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, New Mexico 88210

4. Well Location

Unit Letter J : 1980' Feet From The South Line and 1980' Feet From The East Line

Section 28

Township 9 South

Range 26 East

NMPM

Chaves

County

10. Proposed Depth

6500'

11. Formation

Ordovician

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

3763.0' GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

Undesignated

16. Approx. Date Work will start

As soon as possible

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# K-55	Approx. 1000'	600 sacks	Circulate
7 7/8"	5 1/2"	15.5# J-55	TD	450 sacks	

We propose to drill and test the Ordovician and intermediate formations. Approximately 1000' of surface casing will be set and cement circulated to shut off gravel and cavings. 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 1000', cut brine to 4500', salt water gel & starch to TD.

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

GAS NOT DEDICATED

SPECIAL VALUE FOR 100 DAYS

7/18/90

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 1-11-90

TYPE OR PRINT NAME Clifton R. May

(505)
TELEPHONE NO. 748-1471

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____

DATE

JAN 18 1990

CONDITIONS OF APPROVAL, IF ANY:

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

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WELL LOCATION AND ACREAGE DEDICATION PLAT

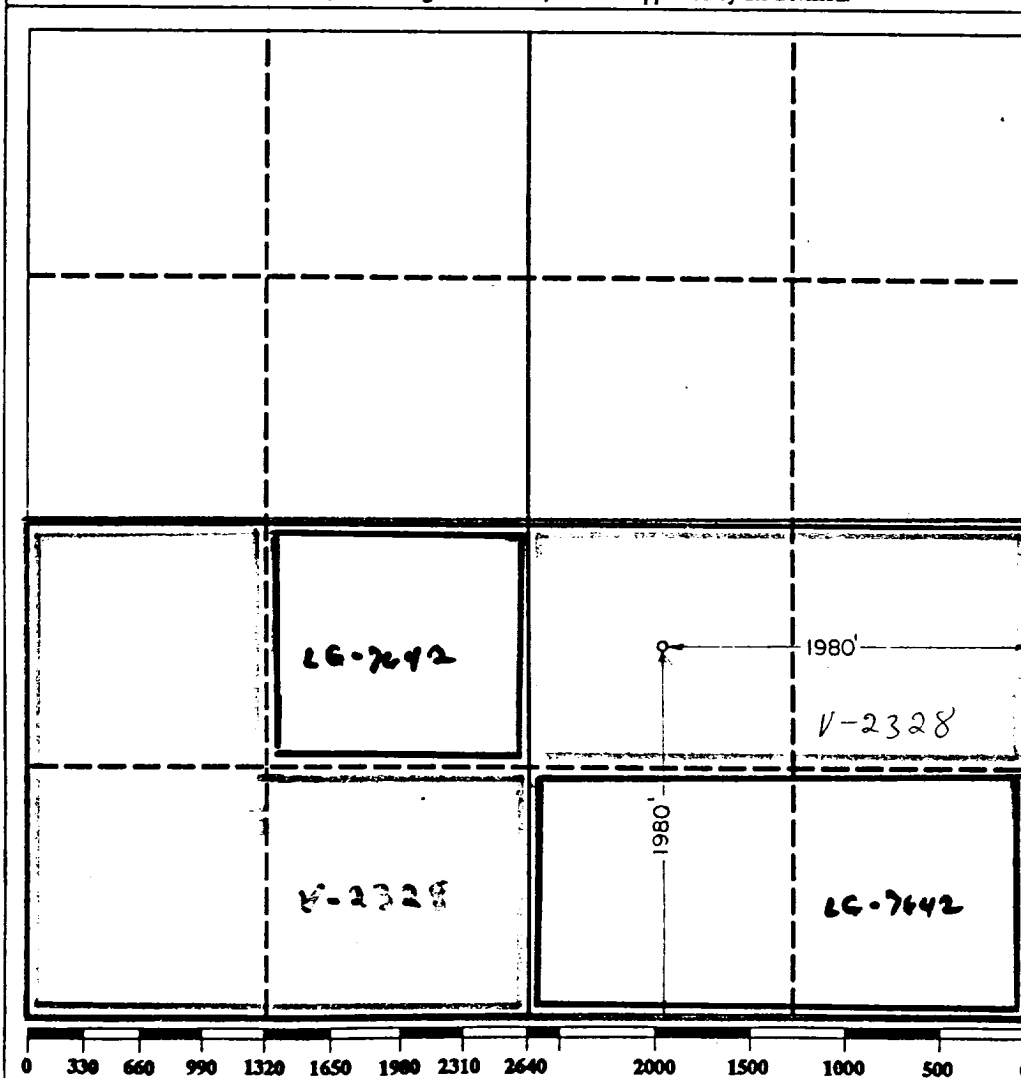
All Distances must be from the outer boundaries of the section

Operator YATES PETROLEUM CORPORATION			Lease BITTERSWEET UNIT		Well No. 1
Unit Letter J	Section 28	Township 9 SOUTH	Range 26 EAST	County NMPM CHAVES	
Actual Footage Location of Well: 1980 feet from the South line and 1980 feet from the East line					
Ground level Elev. 3763.0	Producing Formation ORDOVICIAN		Pool WILDCAT ORDOVICIAN	Dedicated Acreage: 320 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 TO BE UNITIZATION
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

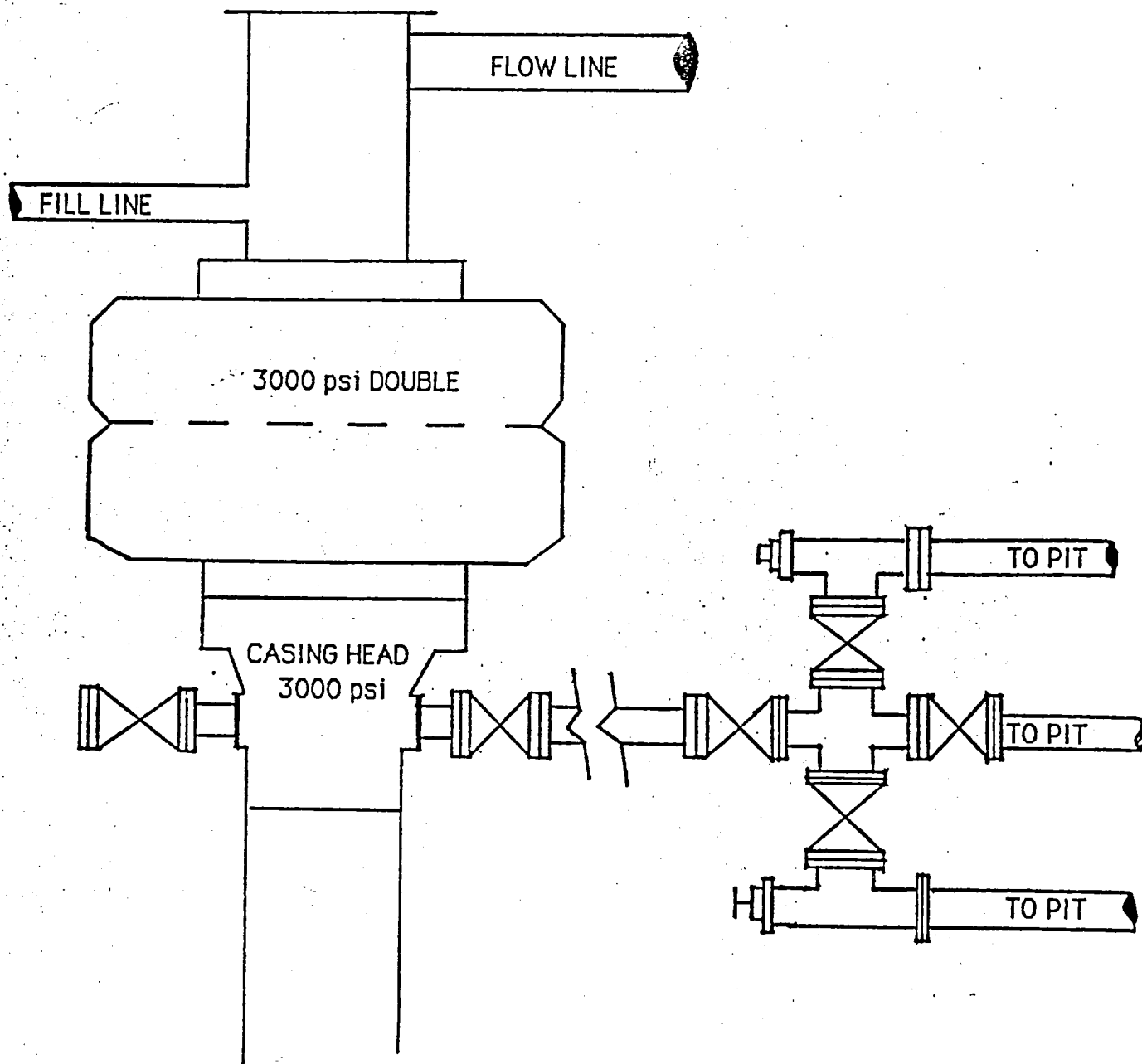
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature Clifton R. May
Printed Name Clifton R. May
Position Permit Agent
Company Yates Petroleum Corporation
Date 1-12-90

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 1/10/90
Signature & Seal of Professional Surveyor Herschel L. Jones
Certificate No. 3640



BLOWOUT PREVENTER