

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

State of New Mexico
Encl. Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

file

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

FEB 22 '90

C. D.

API NO. (assigned by OCD on New Wells)

30-005-62773

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
LG - 7990

7. Lease Name or Unit Agreement Name

Wolf "AHF" State

8. Well No.

1

9. Pool name or Wildcat

Precambrian Wildcat

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, New Mexico 88210

4. Well Location

Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line

Section 13

Township 9 South

Range 27 East

NMPM

Chaves

County

10. Proposed Depth

7000'

11. Formation

Precambrian

12. Rotary or C.T.

Rotary

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

3874.0' 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# J-55	Approx. 1650'	825 sacks	Circulate
7 7/8"	5 1/2"	15.5# J-55	TD	300 sacks	As warranted

We propose to drill and test the precambrian and intermediate formations. Approximately 1650' 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 1650', brine to 5000', SW gel/starch to TD.

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

Post ID-1
3-9-90

M.W. & K. & API

APPROVAL VALID FOR 180 DAYS
DATE OF APPROVAL 2/8/90
OFFICE OF THE ATTORNEY GENERAL

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 2-22-90

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

CONDITIONS OF APPROVAL, IF ANY:

MAR 8 1990

Submit to Appropriate
District Office
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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

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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 Wolf "AHF" State		Well No. 1
Unit Letter A	Section 13	Township 9 South	Range 27 East	County NMPM	Chaves
Actual Footage Location of Well: 660 feet from the North line and 660 feet from the East line					
Ground level Elev. 3874.0' GR		Producing Formation PRECAMBRIAN		Pool WILCOAT	Dedicated Acreage: 40 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
February 22, 1990

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
2/22/90
Signature
Herschel Jones
Professional Surveyor
STATE OF NEW MEXICO
HERSCHEL JONES
Certificate No.
12345
REGISTERED LAND SURVEYOR



