

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

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

APR 17 1992

API NO. (assigned by OCD on New Wells)

30-015-62898

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

VB-0110

7. Lease Name or Unit Agreement Name

Celtic State

8. Well No.

#1

9. Pool name or Wildcat

Und. Pre-Permian

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

ELK OIL COMPANY

3. Address of Operator

Post Office Box 310, Roswell, New Mexico 88202-0310

4. Well Location

Unit Letter E : 1650 Feet From The North Line and 990 Feet From The West Line

Section 13 Township 8 South Range 27 East NMPM Chaves County

10. Proposed Depth

6900'

11. Formation

Fusselman

12. Rotary or C.T.

Rotary

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

3953' GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

WEK

16. Approx. Date Work will start

June 1, 1992

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#	1000'	650 sxs	Circulate
7 7/8	5 1/2"	17#	6900'	400 sxs	4200'

BLOWOUT PREVENTION PROGRAM

See attached

Part ID-1  
5-15-92  
New Loc & API

This acreage is not dedicated to Gas Market.

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 11/20/92  
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 Joseph J. Kelly TITLE President DATE 04/16/92

TYPE OR PRINT NAME Joseph J. Kelly TELEPHONE NO. (505)623-3190

(This space for State Use)

ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE MAY 20 1992

CONDITIONS OF APPROVAL, IF ANY:

NSL-3114  
App'd 5-15-92

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

State of New Mexico  
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

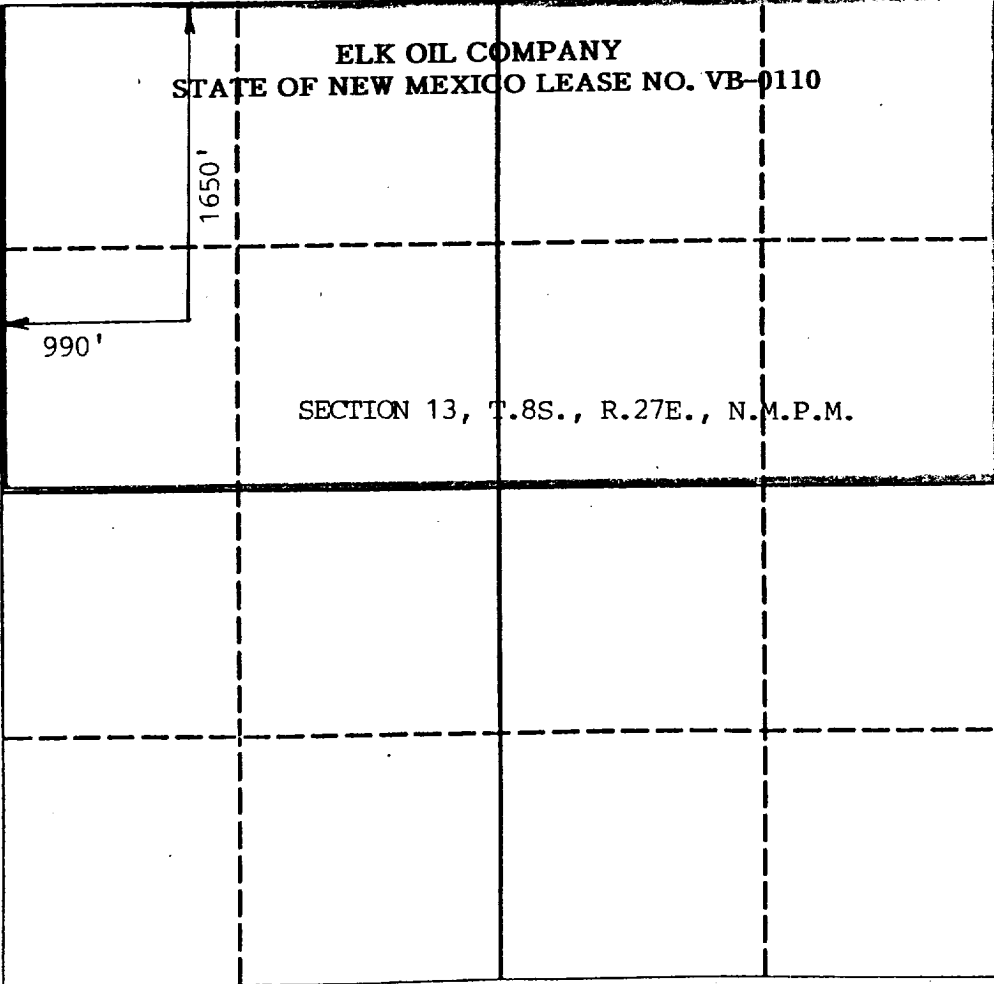
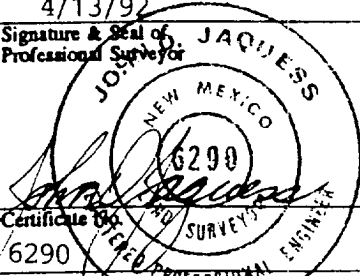
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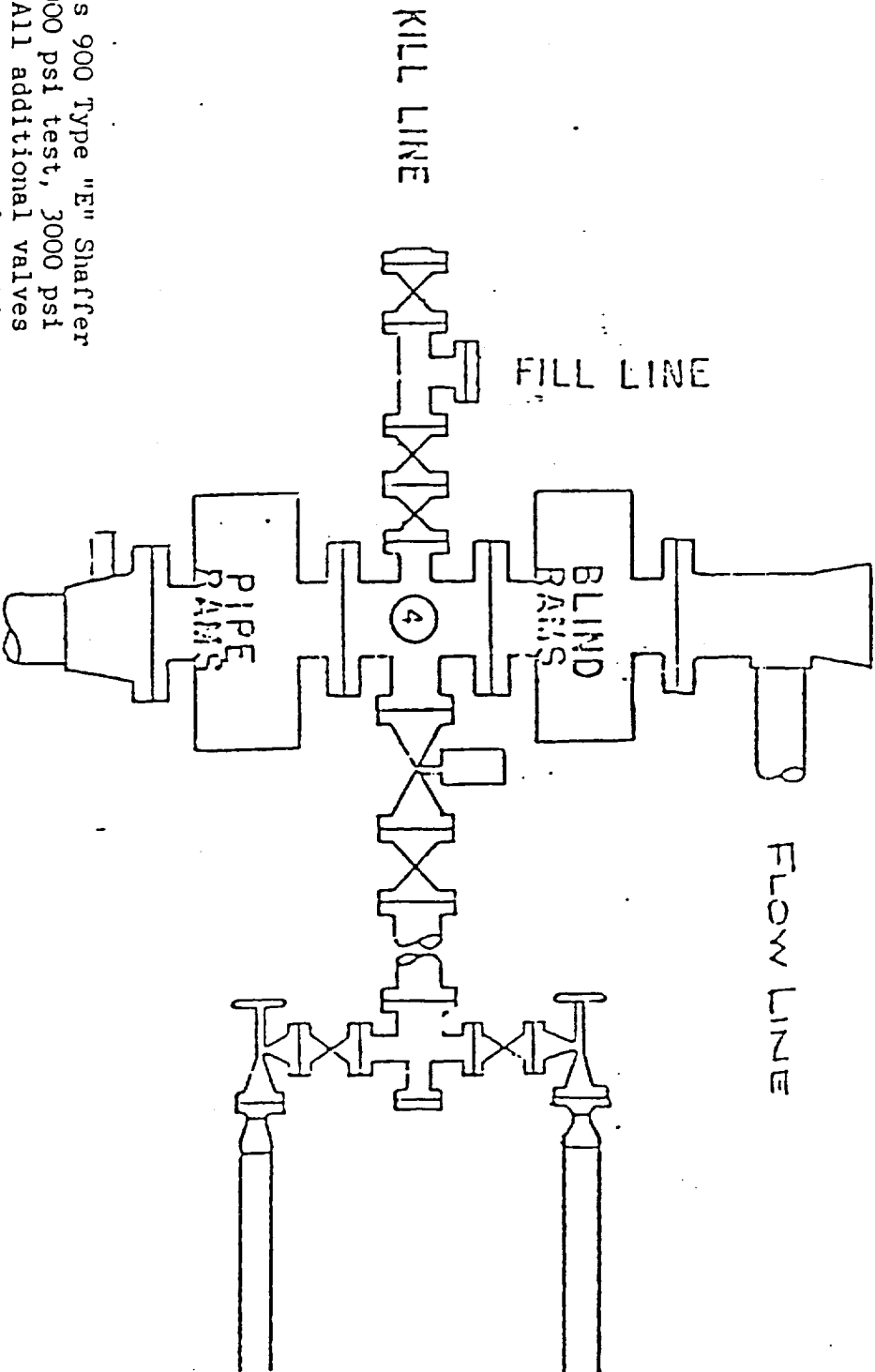
WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator ELK OIL			Lease Celtic State		Well No. #1
Unit Letter E	Section 13	Township 8S.	Range 27E.	NMPM	County CHAVES
Actual Footage Location of Well: 1650 feet from the NORTH line and 990 feet from the WEST line					
Ground level Elev. 3953	Producing Formation Fusselman		Pool Und. Pre-Permian		Dedicated Acreage: 320 Acres
<p>1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.</p> <p>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).</p> <p>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.? <input type="checkbox"/> Yes <input type="checkbox"/> No If answer is "yes" type of consolidation _____</p> <p>If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____</p> <p>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.</p>					
			<b>OPERATOR CERTIFICATION</b> I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Signature _____ Printed Name Joseph J. Kelly Position President Company ELK OIL COMPANY Date 04/16/92		
			<b>SURVEYOR CERTIFICATION</b> 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 4/13/92 Signature & Seal of Professional Surveyor  Certifics No. 6290 BK. 65, PG. 67 & 68		

# BLOWOUT PREVENTER SPECIFICATION

WEK DRILLING CO., INC. - Rtg 1 & 3.



BOP's are 10" Series 900 Type "E" Shaffer Double Hydraulic 6000 psi test, 3000 psi working pressure. All additional valves & connections are the same test & working pressures.