

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

API NO. (assigned by OCD on New Wells)

30-005-62907

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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 ☐

7. Lease Name or Unit Agreement Name

Presler Lake

2. Name of Operator

Hanson Operating Company, Inc.

8. Well No.

#3

3. Address of Operator

Post Office Box 1515, Roswell, New Mexico 88202-1515

9. Pool name or Wildcat

Many Gates San Andres

4. Well Location

Unit Letter H : 1980 Feet From The North Line and 660 Feet From The East Line

Section 12

Township 9S

Range 29E

NMPM

CHaves

County

10. Proposed Depth

3300'

11. Formation

San Andres

12. Rotary or C.T.

Rotary

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

4055' GR

14. Kind & Status Plug. Bond

Statewide

15. Drilling Contractor

16. Approx. Date Work will start

9-21-92

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#	3300'	375sx	surface
7-7/8"	5-1/2"	15.5#	3300'	200sx	

It is proposed to drill the above captioned well w/Rotary tools to a depth of 3300'± and set 5½" csg to surface. If commercial production is indicated, the well will be perf & stimulated as necessary.

BLOW-OUT PREVENTION : 10" 900 DOUBLE SHAFER 3000# WILL BE USED.

Part ID-1
9-18-92

New Loc & API

180 DAYS
3/16/93

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 Lisa L. Jennings TITLE Production Analyst DATE 9-14-92
TYPE OR PRINT NAME Lisa L. Jennings TELEPHONE NO. 622-7330

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE SEP 16 1992

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

RECEIVED

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

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

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

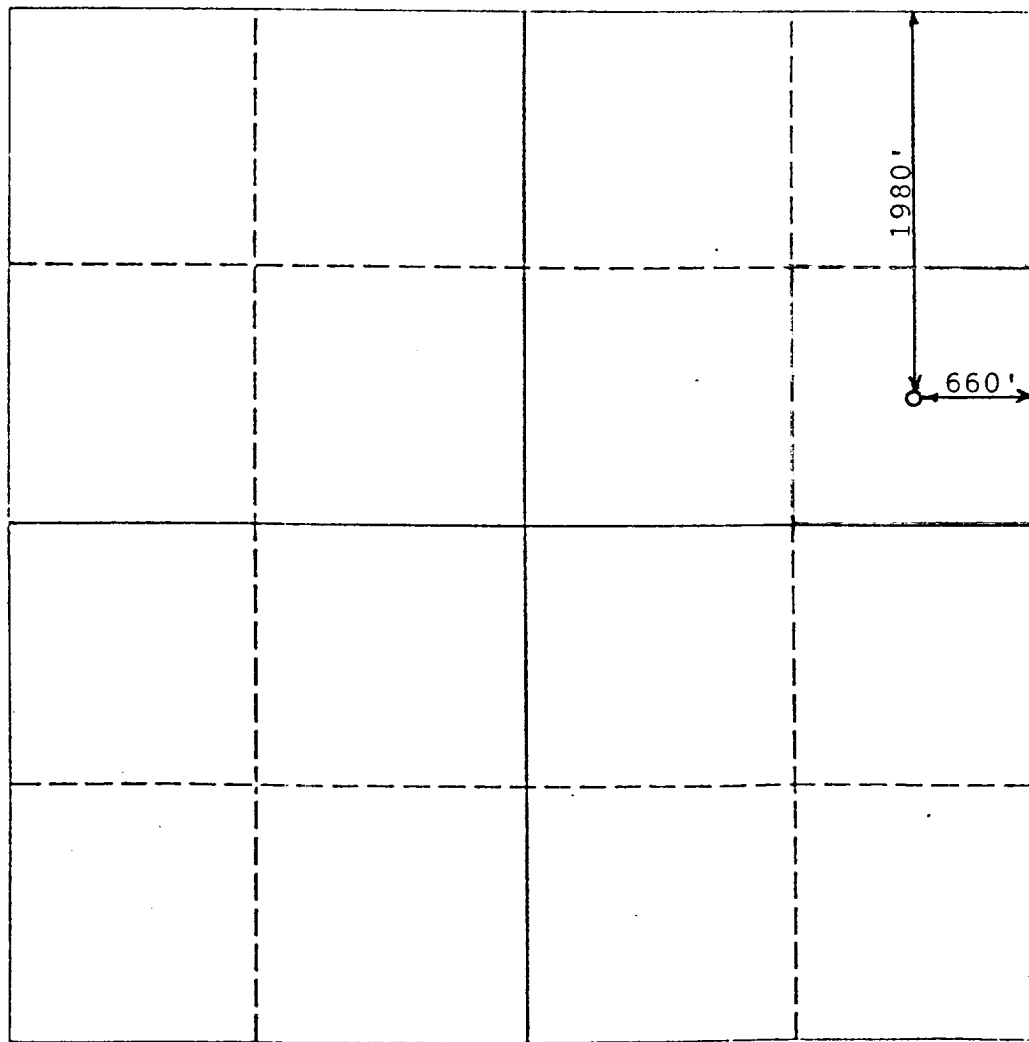
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator Hanson Operating Company			Lease Presler Lake		Well No. 3
Unit Letter H	Section 12	Township 9 South	Range 29 East	County Chaves	
Actual Footage Location of Well: 1980 feet from the North line and 660 feet from the East line					
Ground level Elev. 4055	Producing Formation San Andres		Pool Many Gates	Dedicated Acreage: 40 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communization, 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 communization, 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
Lisa L. Jennings
Printed Name
Lisa L. Jennings
Position
Production Analyst
Company
Hanson Operating Co., Inc.
Date
9-14-92

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
September 10, 1992
Signature & Seal of
Professional Surveyor
P. R. RABATTON

Certificate No.
8112

