

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

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

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

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

API NO. (assigned by OCD on New Wells)

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.

3

9. Pool name or Wildcat

Southeast Acme San Andres

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

ELK OIL COMPANY

3. Address of Operator

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

4. Well Location

Unit Letter D : 330 Feet From The North Line and 330 Feet From The West Line

Section 13 Township 8 South Range 27 East NMPM Chaves County

10. Proposed Depth

2400'

11. Formation

San Andres

12. Rotary or C.T.

Rotary

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

3929' GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

United Drilling

16. Approx. Date Work will start

June 25, 1993

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 3/4"	8 5/8"	24#	300'	225 sxs	Circulate
7 7/8"	5 1/2"	17#	2400'	200 sxs	1500'

BLOWOUT PREVENTION PROGRAM

SEE ATTACHED

This acreage is not dedicated to Gas Market.

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 June 17, 1993

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

(This space for State Use)

GEOLOGIST

APPROVED BY Mark Kelly TITLE GEOLOGIST DATE 6-18-93

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 12-18-93  
UNLESS DRILLING UNDERWAY

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

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

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

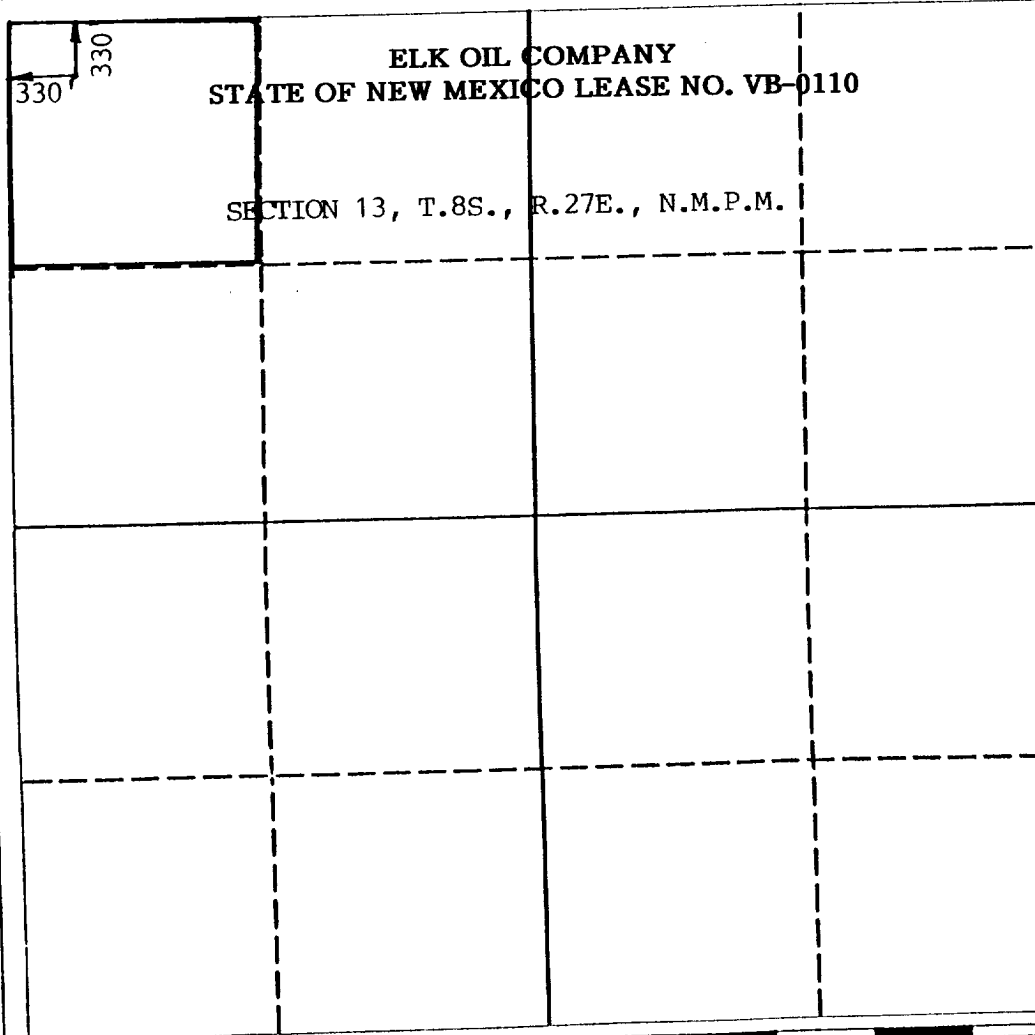
**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

All Distances must be from the outer boundaries of the section

Operator <b>ELK OIL</b>		Lease <b>CELTIC STATE</b>		Well No. <b>#3</b>
Unit Letter <b>D</b>	Section <b>13</b>	Township <b>8 SOUTH</b>	Range <b>27 EAST</b> NMPM	County <b>CHAVES</b>
Actual Footage Location of Well: <b>330</b> feet from the <b>NORTH</b> line and <b>330</b> feet from the <b>WEST</b> line				
Ground level Elev. <b>3929</b>	Producing Formation <b>San Andres</b>	Pool <b>Southeast Acme San Andres</b>	Dedicated Acreage: <b>40</b> 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 \_\_\_\_\_  
Printed Name  
**Joseph J. Kelly**  
Position  
**President**  
Company  
**ELK OIL COMPANY**  
Date  
**June 17, 1993**

**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  
**6/2/93**  
Signature & Seal of Professional Surveyor  
  
Certificate No. **6290**  
**EO14827**

## BLOWOUT PREVENTER SPECIFICATION

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

