

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
ch/ BLM 5/2/93

OIL CONSERVATION DIVISION

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

RECEIVED
JUL 30 1993

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)
30-009-62975

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.
V-2925

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work: DRILL <input checked="" type="checkbox"/> RE-ENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Lease Name or Unit Agreement Name Bill Thorp State			
b. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Well No. <u>4</u>			
2. Name of Operator <u>Collins Oil & Gas Corporation</u>		9. Pool name or Wildcat <u>SE Acme-San Andres</u>			
3. Address of Operator <u>P.O. Box 2443, Roswell, NM 88202-2443</u>					
4. Well Location Unit Letter <u>I</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u> Line Section <u>11</u> Township <u>8-S</u> Range <u>27E</u> NMPM <u>Chaves</u> County					
10. Proposed Depth <u>2200</u>		11. Formation <u>San Andres</u>	12. Rotary or C.T. <u>C.T.</u>		
13. Elevations (Show whether DF, RT, GR, etc.) <u>3939 GL</u>	14. Kind & Status Plug. Bond <u>Blanket</u>	15. Drilling Contractor <u>Collins</u>	16. Approx. Date Work will start <u>ASAP</u>		
17. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
<u>12 1/2"</u>	<u>8-5/8"</u>	<u>24 lb.</u>	<u>460</u>	<u>sufficient to circulate</u>	
<u>7-7/8"</u>	<u>4 1/2"</u>	<u>10.50</u>	<u>2200</u>	<u>200 sxs.</u>	

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 Roy D. Collins TITLE Pres. Collins O/G DATE 7-29-93
 TYPE OR PRINT NAME ROY D. COLLINS TELEPHONE NO. 623-2040

(This space for State Use)
 APPROVED BY Mark Schley GEOLOGIST TITLE _____ DATE 7-30-93
 CONDITIONS OF APPROVAL, IF ANY:

APPROVAL VALID FOR 180 DAYS
 PERMIT EXPIRES 1-30-94
 UNLESS DRILLING UNDERWAY

Submit to Appropriate District Office
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 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

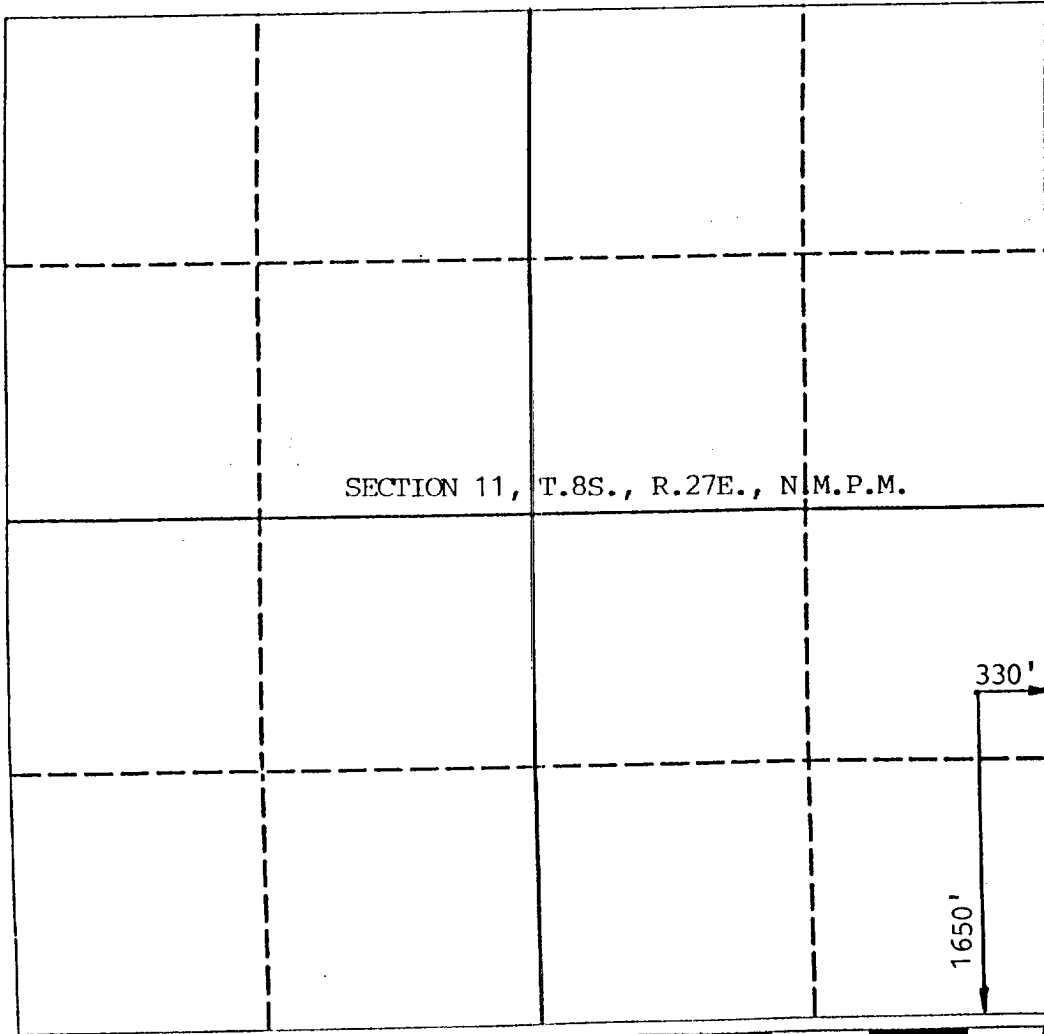
DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator COLLINS OIL & GAS		Lease BILL THORP STATE		Well No. #4
Unit Letter I	Section 11	Township 8S.	Range 27E.	County CHAVES
Actual Footage Location of Well:				
1650 feet from the SOUTH line and		330 feet from the EAST line		
Ground level Elev. 3939	Producing Formation San Andres	Pool SE Acme-San Andres	Dedicated Acreage: 40 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hachure 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 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
Roy D. Collins
 Printed Name
ROY D. COLLINS
 Position
Pres.
 Company
Collins O/G
 Date
7-29-93

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
5/21/93
 Signature & Seal of Professional Surveyor

 Certificate No. **6290**
THORP34

