

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Form C-101  
Revised February 10, 1994  
Instructions on back  
Submit to Appropriate District Office  
State Lease - 6 Copies  
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☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

<sup>1</sup> Operator Name and Address. Yates Petroleum Corporation 105 South Fourth Street Artesia, New Mexico 88210		<sup>1</sup> OGRID Number 025575
<sup>4</sup> Property Code 12658	<sup>4</sup> Property Name Quincy "AMQ" State	<sup>3</sup> API Number 30 - 005-63070
		<sup>4</sup> Well No. #13

<sup>7</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	12	8S	27E		990	South	1550	West	Chaves

<sup>8</sup> Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

<sup>9</sup> Proposed Pool 1 Acme; San Andres, SE	<sup>10</sup> Proposed Pool 2 800
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<sup>11</sup> Work Type Code N	<sup>12</sup> Well Type Code O	<sup>13</sup> Cable/Rotary Rotary-air	<sup>14</sup> Lease Type Code State	<sup>15</sup> Ground Level Elevation 3938'
<sup>16</sup> Multiple No	<sup>17</sup> Proposed Depth 2200'	<sup>18</sup> Formation San Andres	<sup>19</sup> Contractor United	<sup>20</sup> Spud Date ASAP

<sup>21</sup> Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
12 1/4"	8 5/8"	24#	470'	300 sacks	Circulated
7 7/8"	5 1/2"	15.5#	TD	250 sacks	Circulated
					Post ID-1
					5-26-95
					NSL - 3531 & APF

<sup>22</sup> Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

Yates Petroleum Corporation proposes to drill and test the San Andres formation. Approximately 470' of surface casing will be set and circulated. If commercial, production casing will be run and cemented with adequate cover, perforated and stimulated as needed for production.

MAY 4 1995

MUD PROGRAM: Well will be drilled using air

BOPE PROGRAM: BOPE will be installed on the surface casing.

OIL CON. DIV.  
DIST. 2

Note: NSL has been applied for.

<sup>23</sup> I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

Title:

Date:

Clifton R. May

Clifton R. May

Regulatory Agent

5-3-95

Phone:

505-748-1471

OIL CONSERVATION DIVISION

Approved by:

ORIGINAL SIGNED BY TIM W. GUM

Title:

DISTRICT II SUPERVISOR

Approval Date:

MAY 24 1995

Expiration Date:

11-24-95

Conditions of Approval:

Attached ☐

NSL - 3531 5-14-95

# C-101 Instructions

Measurements and dimensions are to be in feet/inches. Well locations will refer to the New Mexico Principal Meridian.

IF THIS IS AN AMENDED REPORT CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT.

- |   |                             |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
|---|-----------------------------|----------|---|----------|---|--------------|---|----------|---|------------|---|-----------------------|---|-----------------------|---|--------------------|---|----------------|---|----------|---|-------------------|---|---------------------|---|-----------------------------|---|-------------------------|---|---------|---|-------|---|---------|---|--------|---|-----------|---|-----|---|--------------------|--|
| <p>1 Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.</p> <p>2 Operator's name and address</p> <p>3 API number of this well. If this is a new drill the OCD will assign the number and fill this in.</p> <p>4 Property code. If this is a new property the OCD will assign the number and fill it in.</p> <p>5 Property name that used to be called 'well name'</p> <p>6 The number of this well on the property.</p> <p>7 The surveyed location of this well New Mexico Principal Meridian NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD Unit Letter.</p> <p>8 The proposed bottom hole location of this well at TD</p> <p>9 and 10 The proposed pool(s) to which this well is being drilled.</p> <p>11 Work type code from the following table:</p> <table border="0"> <tr><td>N</td><td>New well</td></tr> <tr><td>E</td><td>Re-entry</td></tr> <tr><td>D</td><td>Drill deeper</td></tr> <tr><td>P</td><td>Plugback</td></tr> <tr><td>A</td><td>Add a zone</td></tr> </table> <p>12 Well type code from the following table:</p> <table border="0"> <tr><td>O</td><td>Single oil completion</td></tr> <tr><td>G</td><td>Single gas completion</td></tr> <tr><td>M</td><td>Mutiple completion</td></tr> <tr><td>I</td><td>Injection well</td></tr> <tr><td>S</td><td>SWD well</td></tr> <tr><td>W</td><td>Water supply well</td></tr> <tr><td>C</td><td>Carbon dioxide well</td></tr> </table> <p>13 Cable or rotary drilling code</p> <table border="0"> <tr><td>C</td><td>Propose to cable tool drill</td></tr> <tr><td>R</td><td>Propose to rotary drill</td></tr> </table> <p>14 Lease type code from the following table:</p> <table border="0"> <tr><td>F</td><td>Federal</td></tr> <tr><td>S</td><td>State</td></tr> <tr><td>P</td><td>Private</td></tr> <tr><td>N</td><td>Navajo</td></tr> <tr><td>J</td><td>Jicarilla</td></tr> <tr><td>U</td><td>Ute</td></tr> <tr><td>I</td><td>Other Indian tribe</td></tr> </table> <p>15 Ground level elevation above sea level</p> <p>16 Intend to mutiple complete? Yes or No</p> <p>17 Proposed total depth of this well</p> | N                           | New well | E | Re-entry | D | Drill deeper | P | Plugback | A | Add a zone | O | Single oil completion | G | Single gas completion | M | Mutiple completion | I | Injection well | S | SWD well | W | Water supply well | C | Carbon dioxide well | C | Propose to cable tool drill | R | Propose to rotary drill | F | Federal | S | State | P | Private | N | Navajo | J | Jicarilla | U | Ute | I | Other Indian tribe | <p>18 Geologic formation at TD</p> <p>19 Name of the intended drilling company if known.</p> <p>20 Anticipated spud date.</p> <p>21 Proposed hole size ID inches, proposed casing OD inches, casing weight in pounds per foot, setting depth of the casing or depth and top of liner, proposed cementing volume, and estimated top of cement</p> <p>22 Brief description of the proposed drilling program and BOP program. Attach additional sheets if necessary.</p> <p>23 The signature, printed name, and title of the person authorized to make this report. The date this report was signed and the telephone number to call for questions about this report.</p> |
| N   | New well                    |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| E   | Re-entry                    |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| D   | Drill deeper                |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| P   | Plugback                    |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| A   | Add a zone                  |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| O   | Single oil completion       |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| G   | Single gas completion       |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| M   | Mutiple completion          |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| I   | Injection well              |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| S   | SWD well                    |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| W   | Water supply well           |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| C   | Carbon dioxide well         |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| C   | Propose to cable tool drill |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| R   | Propose to rotary drill     |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| F   | Federal                     |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| S   | State                       |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| P   | Private                     |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| N   | Navajo                      |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| J   | Jicarilla                   |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| U   | Ute                         |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |
| I   | Other Indian tribe          |          |   |          |   |              |   |          |   |            |   |                       |   |                       |   |                    |   |                |   |          |   |                   |   |                     |   |                             |   |                         |   |         |   |       |   |         |   |        |   |           |   |     |   |                    |  |

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Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number <b>30-005-63070</b>	Pool Code <b>800</b>	Pool Name <b>ACME; SAN ANDRES, SE</b>
Property Code	Property Name <b>QUINCY "AMQ" STATE</b>	Well Number <b>13</b>
OGRID No. <b>025575</b>	Operator Name <b>YATES PETROLEUM CORPORATION</b>	Elevation <b>3936</b>

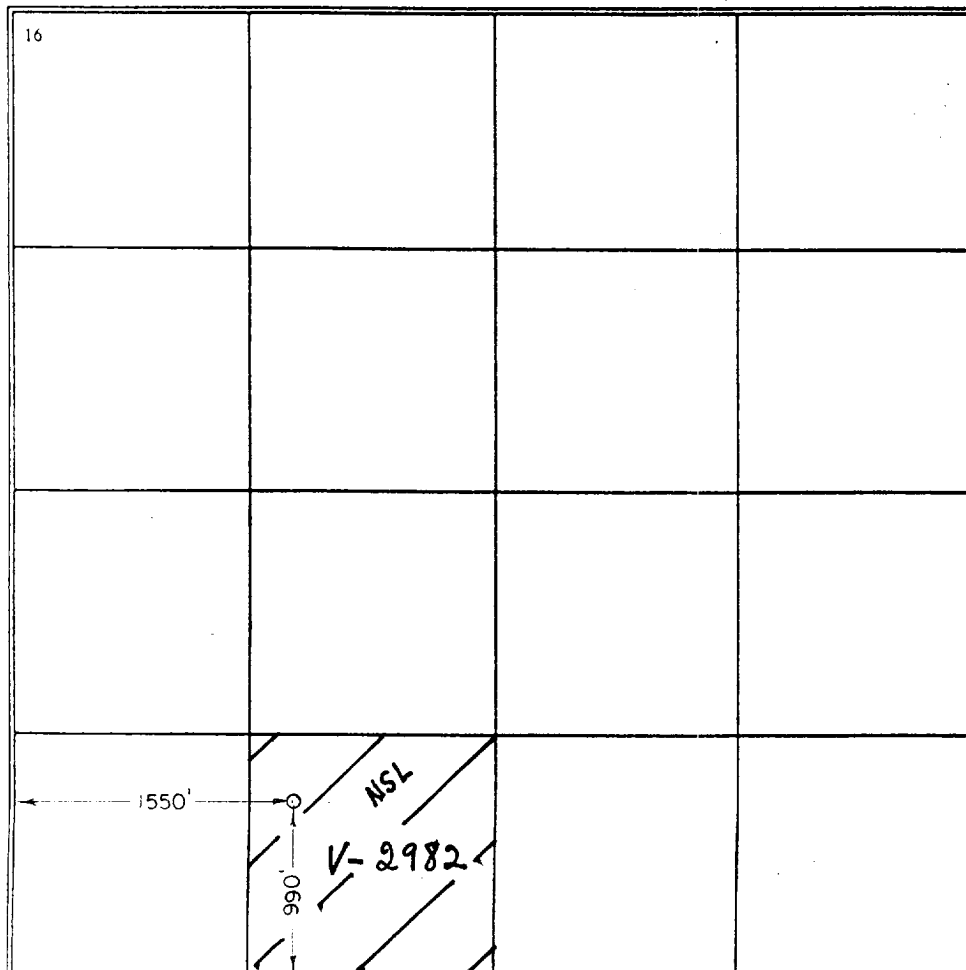
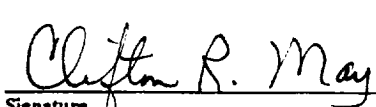
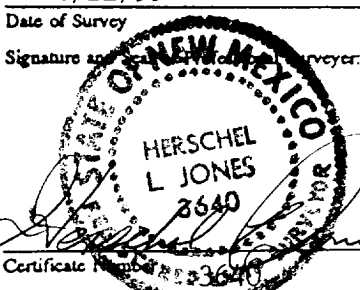
<sup>10</sup> Surface Location

UL or lot no. <b>N</b>	Section <b>12</b>	Township <b>8 S</b>	Range <b>27 E</b>	Lot Idn	Feet from the <b>990</b>	North/South line <b>SOUTH</b>	Feet from the <b>1550</b>	East/West line <b>WEST</b>	County <b>CHAVES</b>
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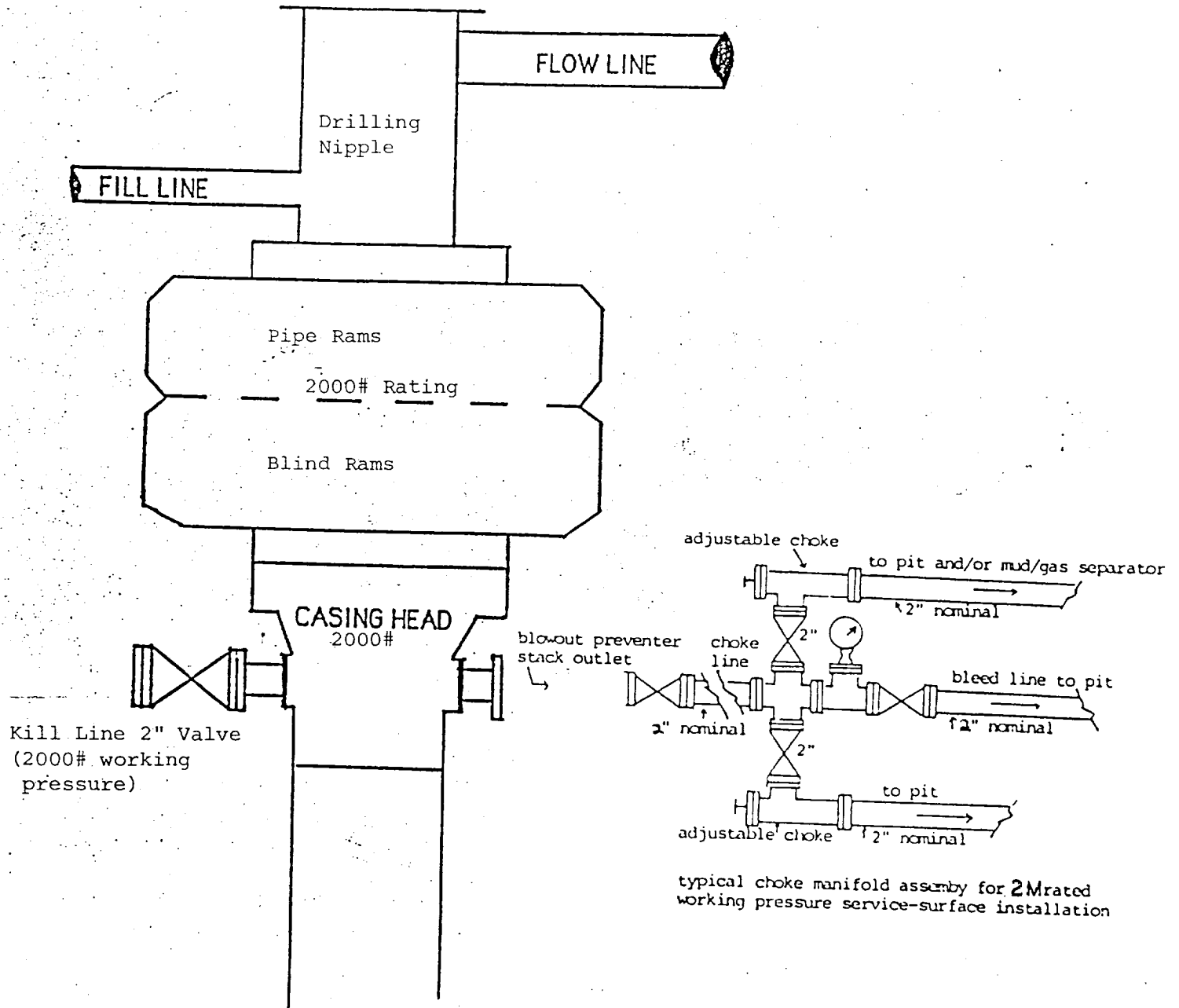
<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
<sup>12</sup> Dedicated Acres <b>40</b> <sup>13</sup> Joint or Infill <sup>14</sup> Consolidation Code <sup>15</sup> Order No.									

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<sup>16</sup> 	<sup>17</sup> 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 Regulatory Agent Title 5-3-95 Date			
	<sup>18</sup> 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 belief. 4/12/95 Date of Survey Signature and Seal of Surveyor:  Certificate Number 2640			

# YATES PETROLEUM CORPORATION



**BLOWOUT PREVENTER  
2M SYSTEM**