

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

HOBBS OCD

JUN 26 2014

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State of New Mexico
Energy Minerals and Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised July 18, 2013

AMENDED REPORT

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

¹ Operator Name and Address EOR Operating Company, Inc. 200 N. Loraine, STE 1440 Midland, TX 79701		² OGRID Number 257420
⁴ Property Code 306003	³ Property Name Crossroads, Siluro Devonian UNIT	⁵ API Number 30-025-03629 30-025-07629
		⁶ Well No. 101

7. Surface Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
A	34	09S	36E		660	N	660	E	Lea

8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County

9. Pool Information

Pool Name Crossroads; Siluro Devonian	Pool Code 13490
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Additional Well Information

¹¹ Work Type P	¹² Well Type O	¹³ Cable/Rotary R	¹⁴ Lease Type P	¹⁵ Ground Level Elevation 4020
¹⁶ Multiple N	¹⁷ Proposed Depth 12187	¹⁸ Formation Devonian	¹⁹ Contractor	²⁰ Spud Date
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

We will be using a closed-loop system in lieu of lined pits

21. Proposed Casing and Cement Program

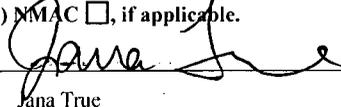
Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	17 1/4"	13 3/8"	48	323	400	Surf
Int.	12 1/4"	9 5/8"	36	4199	3000	Surf
Prod.	7 7/8"	5 1/2"	20	12170	700	9800

Casing/Cement Program: Additional Comments

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22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
	3000	6000	

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify that I have complied with 19.15.14.9 (A) NMAC <input type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input type="checkbox"/> , if applicable. Signature:  Printed name: Jana True Title: Production/Regulatory Manager E-mail Address: jtrue@enhancedoilres.com Date: 06/20/14	OIL CONSERVATION DIVISION	
	Approved By: 	
	Title: Petroleum Engineer	
	Approved Date: 07/09/14	Expiration Date: 07/09/19
	Conditions of Approval Attached	

JUL 09 2014