

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

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

API NO. (assigned by OCD on New Wells)
30-025-22353

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
K-4105

7. Lease Name or Unit Agreement Name

STATE "L"

8. Well No.

1

9. Pool name or Wildcat

WADA/PENTA Lane Abo

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

NORTH LEA JOINT VENTURE/COM-TIC-Resources

3. Address of Operator

1624 - MARKET ST., DENVER, CO 80202

4. Well Location

Unit Letter K : 1980 Feet From The 1950 S Line and 1950 Feet From The W Line

Section 2 Township 12 S Range 33 E NMPM LEA County

10. Proposed Depth

8762-98

11. Formation

abo

12. Rotary or C.T.

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

4250' GL

14. Kind & Status Plug. Bond

15. Drilling Contractor

16. Approx. Date Work will start

11/22/89

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
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Operator proposes temp. aband. of Bough "C" / Attempt completion in ABO as follows:

1. SET RBP @ 9600' ±. TWO 5x SAND ON TOP.
2. PERFORATE ABO 8762-8795, 1 ISPF.
3. ACID STIMULATE. SWAB TEST. PRODUCE/OR ABANDON AND RETURN TO BOUGH "C" PERFS.

TOP OF CEMENT BEHIND EXISTING 5 1/2" CIG. = 5150' FS

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 R. C. Turcell TITLE Consulting Engr. DATE 11/21/89

TYPE OR PRINT NAME R. C. TURCELL TELEPHONE NO. 303/623-5034

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEN
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NOV 22 1989

RECEIVED

NOV 21 1989

OCD
HOBBS OFFICE