

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

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

API NO. (assigned by OCD on New Wells)
30-025- 23056 23053
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work: DRILL <input type="checkbox"/> RE-ENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/>		7. Lease Name or Unit Agreement Name Pruitt "C"	
b. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Well No. 1	
2. Name of Operator D-Mil Production, Inc.		9. Pool name or Wildcat Vada Penn Wolfcamp	
3. Address of Operator P. O. Box 49, Argyle, TX 76226			
4. Well Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line Section 15 Township 9S Range 34E NMPM Lea County			
10. Proposed Depth 9020'		11. Formation Wolfcamp Penn	
12. Rotary or C.T.			
13. Elevations (Show whether DF, RT, GR, etc.) 4233 GR		14. Kind & Status Plug. Bond	
15. Drilling Contractor		16. Approx. Date Work will start Upon approval	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15	11 3/4	42	400	400	Circ.
11	8 5/8	32	4200	600	2000
7 7/8	5 1/2	17	9900	250	8800

Propose to PB to Wolfcamp.

Run 5 1/2 CIBP, set at 9700', perf 9062-9074, 9012-9020 2 holes per foot. Acidize w/2000 gal HCL.

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 [Signature] TITLE Agent DATE 11/17/93
TYPE OR PRINT NAME: TELEPHONE NO.

(This space for State Use) **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE NOV 23 1993

CONDITIONS OF APPROVAL, IF ANY:

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

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Santa Fe, New Mexico 87504-2088

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator D-Mill Production, Inc.			Lease Pruitt "C"		Well No. 1
Unit Letter J	Section 12	Township 9S	Range 34E	County NMPM	Lea

Actual Footage Location of Well:

1980 feet from the South line and	1980 feet from the East line
Ground level Elev. 4233 GR	Producing Formation Wolfcamp
Pool Wildcat	Dedicated Acreage: 40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.

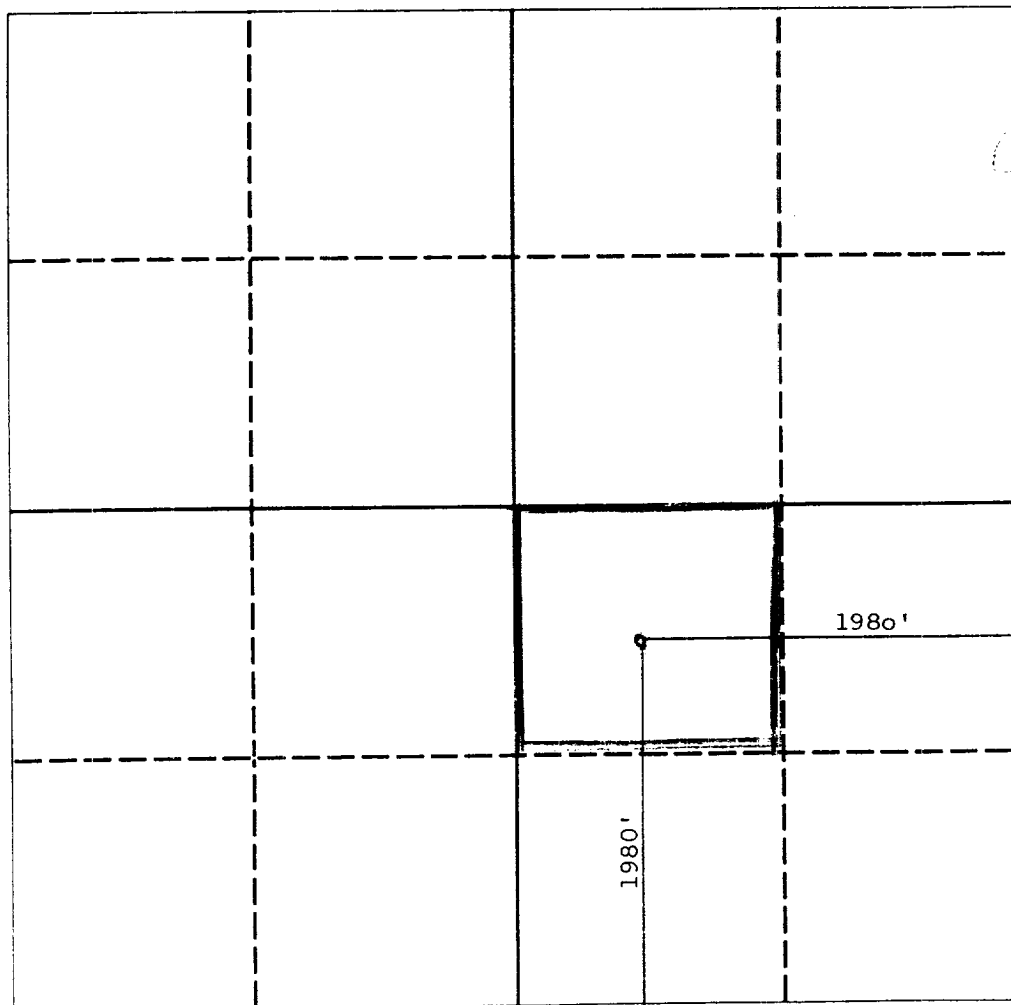
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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

Laren Holler

Printed Name

Agent

Position

D-Mill Production, Inc

Company

11/17/93

Date

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

Signature & Seal of
Professional Surveyor

Certificate No.