

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK <b>DRILL</b> <input checked="" type="checkbox"/> <b>DEEPEN</b> <input type="checkbox"/> <b>PLUG BACK</b> <input type="checkbox"/>			5. LEASE DESIGNATION AND SERIAL NO. <b>060177</b>	
b. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>			6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR <b>R. H. Fulton</b>			7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR <b>700 Hanson &amp; Wilson, Inc., 315 West 31st St., New York 1, N.Y.</b>			8. FARM OR LEASE NAME <b>Shearn Federal</b>	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.) At surface <b>660 North 4th St. Line, Sec. 13, Twp. 8N, Rge. 30E</b> At proposed prod. zone <b>in section</b>			9. WELL NO. <b>3</b>	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* <b>1 mile west of</b>			10. FIELD AND POOL, OR WILDCAT <b>Wildcat</b>	
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any) <b>50'</b>		16. NO. OF ACRES IN LEASE <b>50</b>		17. NO. OF ACRES ASSIGNED TO THIS WELL <b>40</b>
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. <b>1st well</b>		19. PROPOSED DEPTH <b>100'</b>		20. ROTARY OR CABLE TOOLS <b>Rotary</b>
21. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>4062 GR</b>			22. APPROX. DATE WORK WILL START* <b>10/14/69</b>	

## 23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
<b>11"</b>	<b>5 5/8"</b>	<b>25.5</b>	<b>50'</b>	<b>200 ex. CIRCULATE</b>
<b>7 7/8"</b>	<b>4 1/2"</b>	<b>25.5</b>	<b>50'</b>	<b>200 ex.</b>

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. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24. SIGNED \_\_\_\_\_ TITLE **Geologist** DATE **10-14-69**  
(This space for Federal or State office use)

PERMIT NO. \_\_\_\_\_ APPROVAL DATE \_\_\_\_\_  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions On Reverse Side

## Instructions

**General:** This form is designed for submitting proposals to perform certain well operations, as indicated, on all types of lands and leases for appropriate action by either a Federal or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

**Item 1:** If the proposal is to redrill to the same reservoir at a different subsurface location or to a new reservoir, use this form with appropriate notations. Consult applicable State or Federal regulations concerning subsequent work proposals or reports on the well.

**Item 4:** If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

**Item 14:** Needed only when location of well cannot readily be found by road from the land or lease description. A plat, or plats, separate or on this reverse side, showing the roads to, and the surveyed location of, the well, and any other required information, should be furnished when required by Federal or State agency offices.

**Items 15 and 18:** If well is to be, or has been directionally drilled, give distances for subsurface location of hole in any present or objective production zone.

**Item 22:** Consult applicable Federal or State regulations, or appropriate officials, concerning approval of the proposal before operations are started.

EXICO OIL CONSERVATION CO. I  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

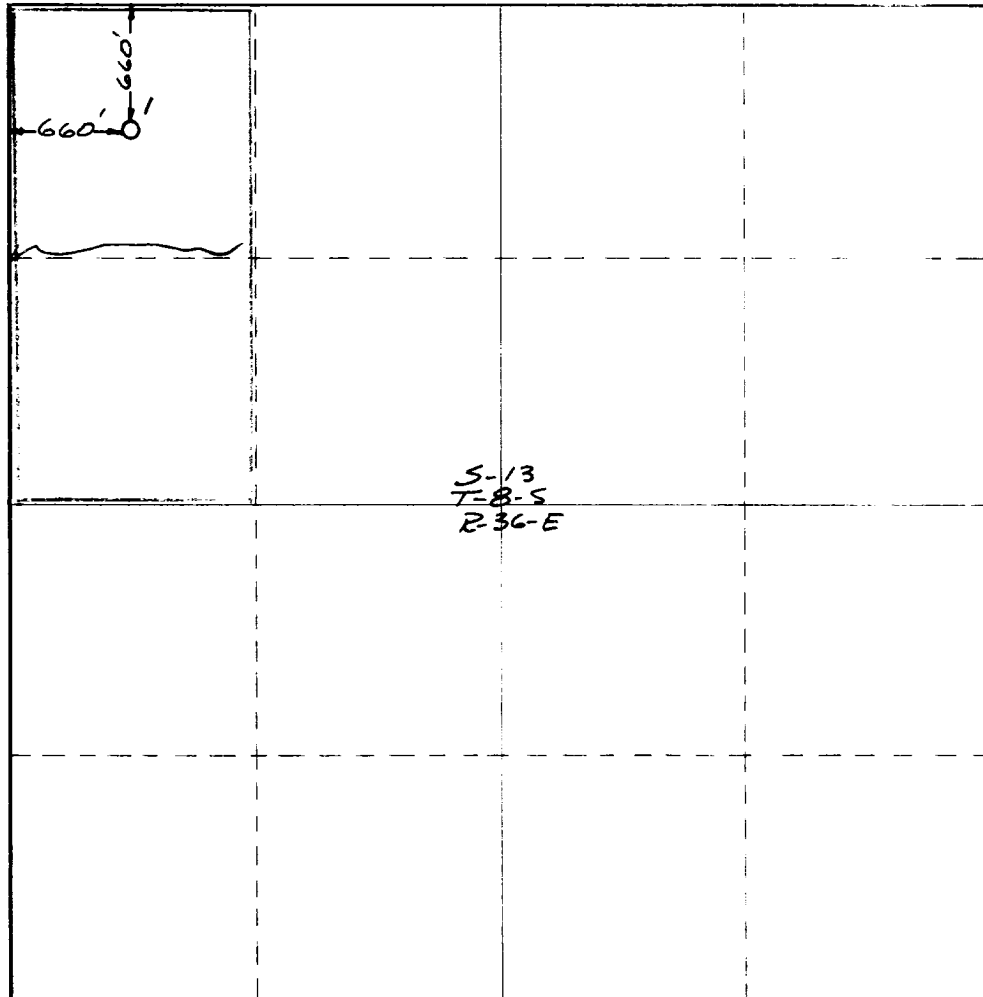
Operator <b>R. H. Fulton</b>			Lease <b>Shearn Federal</b>		Well No. <b>1</b>
Unit Letter <b>D</b>	Section <b>13</b>	Township <b>8S</b>	Range <b>36E</b>	County <b>Roosevelt</b>	
Actual Plotage Location of Well: <b>660</b> feet from the <b>North</b> line and <b>660</b> feet from the <b>West</b> line					
Ground Level Elev. <b>4062</b>	Producing Formation <b>San Andres</b>		Pool <b>Wildcat</b>	Dedicated Acreage: <b>40 70</b> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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 interests 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 interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name \_\_\_\_\_  
Position  
**Agent**  
Company  
**R. H. Fulton**  
Date  
**10-6-69**

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  
**October 7, 1969**  
Registered Professional Engineer  
and/or Land Surveyor

*W. E. Shown*  
Certificate No.  
**2189**