Submit to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-101 Revised 1-1-89

| District Office State Lease — 6 copies | 2 |
|----------------------------------------|-------|
| Fee Lease 5 copies | OIL C |
| - | 011 |

CONDITIONS OF APPROVAL, IF ANY:

| ate Lease — 6 copies ce Lease — 5 copies | OIL C | ONSERVATION | DIVISION | API NO. (assigned by OCD on New Wells) 3 1 - 11 - 208 - 5 5. Indicate Type of Lease | | |
|-------------------------------------------|----------------------------|--------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------------------------|--|
| TRICT I D. Box 1980, Hobbs, NM | 88240 ✓ San | P.O. Box 2088 sta Fe, New Mexico 8 | 7504-2088 | | | |
| TRICT II . Drawer DD, Artesia, NA | | · | | 6. State Oil & Gas Lease ! | ATE FEE | |
| TRICTIII | NR # #7410 | | | V-2096 | 2 | |
| O Rio Brazos Rd., Aztec, | NM 8/4IV | DRILL, DEEPEN, OF | R PLUG BACK | | | |
| | ON FOH PERMIT TO | DRICE, DELI EN, O. | | 7. Lease Name or Unit Ag | reement Name | |
| Type of Work: DRILL | RE-ENTER | DEEPEN | PLUG BACK | Fox "C" | STATE | |
| Type of Well: | 2 | STNGLE _ | MULTIPLE | Fox | C/A.C | |
| MET MET Q | OTHER | 2 0NE | ZONE | 8. Well No. | | |
| Name of Operator | | / | | 8. Well No. | | |
| LAYTON | | ISES, INC. | | 9. Pool name or Wildcat | | |
| Address of Operator 3103 79 | MST. Lu | BBOCK, Tx. | 79423 | HLISON | ENN | |
| Well Location | | | | Feet From The | EAST Lin | |
| Unit Letter | : 660 Feet Fro | om The NORTH | Line and | | | |
| 2 | - T | in 85 Ran | 36E | IMPM KOOSE | VELT County | |
| Section 3 | Townsh | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | 12. Rotary or C.T. | |
| | | 10. Proposed Depth | | ormation PENN | ROTARY | |
| | | //// | 15. Drilling Contractor | 16. Approx. | Date Work will start | |
| Elevations (Show whether | or DF, RT, GR, etc.) | 4. Kind & Status Plug. Bond | 1 / 1 | 6. Co. Octob | ER 15 1992 | |
| 406 | 0 02 0 | OPOSED CASING AN | | | | |
| | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH | SACKS OF CEMEN | EST. TOP | |
| SIZE OF HOLE | 13 3/B | 54 | 350 | 400 | SULFACE | |
| 124 | 8 5/8 | 32 | 9/50 | 1800 | 4000 | |
| 71/8 | 52 | 20 | 9800 | 1000 | | |
| NIEND ZONE. I POUBLE X VILL EM | Biomonz | TO 980 PREVENTOR PSI PR 5-10 # MO | , PROGRA | n WILL 1 | NCLUDE | |
| I hereby certify that the info | ARK INTERPRESENT B. VI. 11 | \nearrow | | | E AND PROPOSED NEW PRODUCE DATE BOO TELEPHONE NO. 745-3 | |
| | | | | | a a = 1 A | |
| (This space for State Heat) | GINAL SIGNED | BY RAY SMITH | | | OCT 14 | |
| FiF | ELO REP. H | | TITLE | | DATE | |

NEW MEXICO OIL CONSERVATION COMMISSION LL LOCATION AND ACREAGE DEDICA - N PLAT

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

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

| Dr. nacrico | | | Legee | n / 11 | | · · · · · · · · · · · · · · · · · · · | Well No. | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|--|
| Operator | Enternrices | Inc | * | <u> </u> | | | 4 | |
| | Enterprises, Sec tion | Township | | Fox State County | | | <u> </u> | |
| Init Letter | <u> </u> | 8 South | n a | 36 East | 1 | Roosevelt | | |
| A | 36 | 6 South | | о пазс | 1 1005 | | | |
| Actual Footage Loc | 37. | orth | 510 | | ₽⊃ | st | | |
| 660 | toot Hour the | orth line a | 194 | tee | t from the | | line | |
| Ground Level Elev. | Producing For | " A " | Pool | |) | | ated Acreage: 80 | |
| 4060.00 | 1006 | | | LLISON Y | | | Actes | |
| 1. Outline the second of the | han one lease is and royalty). an one lease of decommunitization, the lease of decommunitization | dedicated to the vifferent ownership saitization, force-powers is "yes;" typowners and tract ded to the well until | well by covell, outling is dedicate coling. etc? e of consome criptions all interes | e each and ide ed to the well, lidation which have a | ctually been consolidated | consolidated. (by communithas been appro | | |
| | | | ==- | | | Name Position PRESIDE Company AYTON En Oate 10 - 8 I hereby certification on this person of actual | y that the well location lat was plotted from field surveys made by me or | |
| | | | | | | Date Surveyed March 16 Registered Profes and/or Land Surve | 5, 1987 stonal Engineer | |
| | 100 1000 1000 10 | V 1 | **** | | 1 | 6541 | | |
| 0 330 660 | 190 1320 1690 16 | 00-08 3168 00 | 2000 19 | 00 1900 | 800 0 | | | |