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LAND OFFICE	
OPERATOR	

5A. Indicate Type of Lease STATE ☒ REC ☐
5. State Oil & Gas Lease No. LG 341
7. Unit Agreement Name
8. Farm or Lease Name Meredith Smith State
9. Well No. 1
10. Field and Pool, or Wildcat So. Caprock Queen
12. County Chaves
19. Proposed Depth 3200'
19A. Formation Queen
20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) 4414.6'
21A. Kind & Status Plug. Bond One well Plugging
21B. Drilling Contractor BB & H Drilling
22. Approx. Date Work will start 6/22/82

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well OIL WELL ☐ GAS WELL ☐ OTHER ☐	DRILL ☒ DEEPEN ☐ PLUG BACK ☐
2. Name of Operator Meredith Smith	
3. Address of Operator Box 997, Lovington, New Mexico 88260	
4. Location of Well UNIT LETTER <u>E</u> LOCATED <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>16</u> TWP. <u>15S</u> RGE. <u>31 E</u> NMPM	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4"	8 5/8"	24#	340'	225	Circ.
7 7/8"	5 1/2"	15.50#	3200'	300	

Completion to be conventional perforation and treatment

Blowout preventor to be of adequate size for depth and area.

***Cement on the production casing must be brought from the top of the salt or anhydrite to the surface casing by either circulating with cement or a DV tool at the top of the salt.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 12/21/82
UNLESS DRILLING UNDERWAY

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.

Signed Meredith Smith Title OPERATOR Date JUNE 16 1982

(This space for State Use)

ORIGINAL SIGNED BY

APPROVED BY JERRY SEXTON TITLE DISTRICT SUPERVISOR DATE JUN 21 1982

CONDITIONS OF APPROVAL, IF ANY:

***SEE ABOVE

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form O-101
Supersedes O-129
Effective 1-1-65

All distances must be from the outer boundaries of the Section

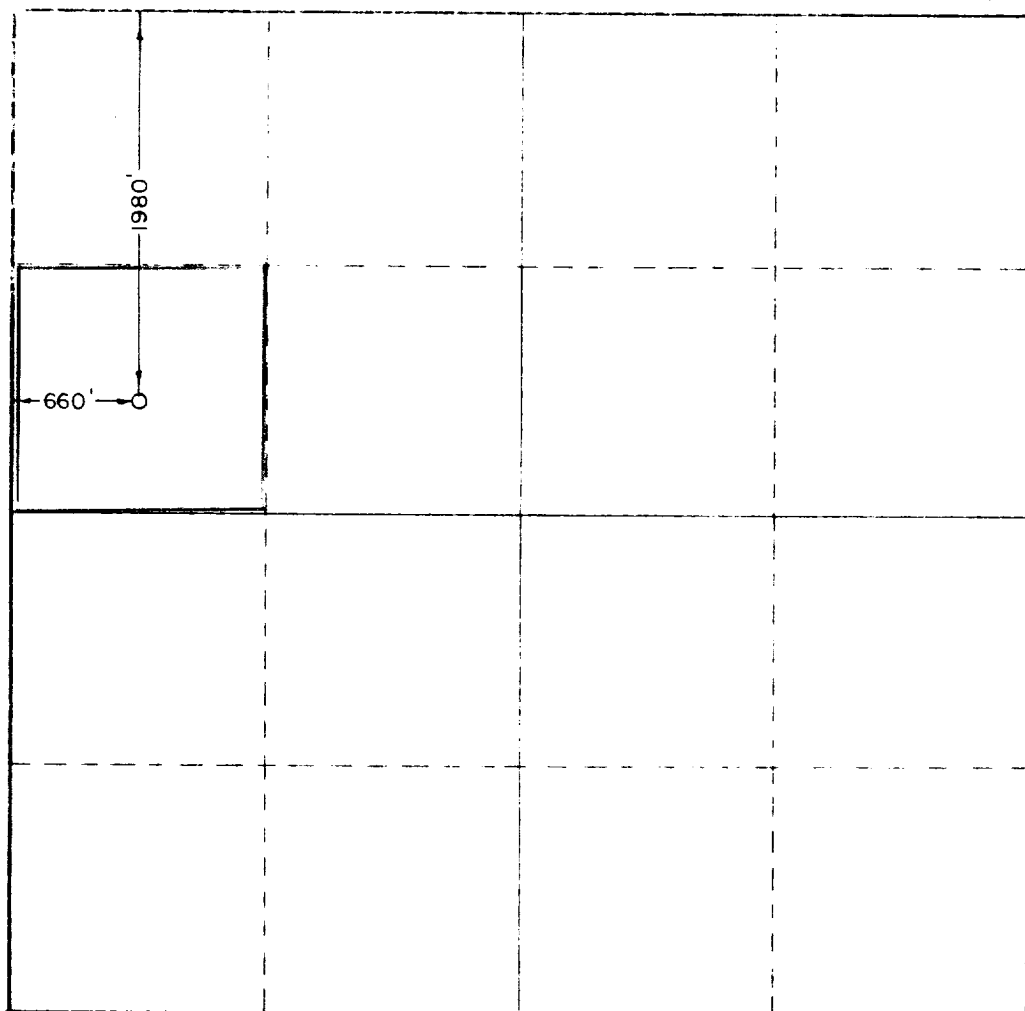
Owner MEREDITH SMITH		Name <i>Meredith Smith</i>		Well No. 1	
Section L	Range 16	Township 15 South	Range 31 East	County Chaves	
Section 1980		Range North		Range 660	
Section 4414.6'		Range Queens		Range South Caprock Queens	
Section 4414.6'		Range Queens		Range 40-160	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty)
- 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, force-pooling, or otherwise) or until a non-standard unit communitizing 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.

Meredith Smith

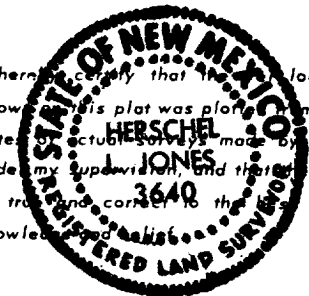
Name

Position

Company

Date

I hereby certify that the 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

June 17, 1982

Registered Professional Engineer and/or Land Surveyor

Herschel J. Jones

Certificate No.

3640

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600

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JUN 18 1982
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