

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 87501

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

AUG 07 1991

O. C. D.

API NO. (assigned by OCD on New Wells)  
30-005-21103

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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 ☐ MULTI FLE ZONE ☐

7. Lease Name or Unit Agreement Name

Presler Lake

2. Name of Operator

Hanson Operating Company, Inc.

8. Well No.

#1

3. Address of Operator

P. O. Box 1515, Roswell, New Mexico 88202-1515

9. Pool name or Wildcat

Cato *San Andres*

4. Well Location

Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line

Section 7 Township 9S Range 30E NMPM Chaves County

10. Proposed Depth  
3375'

11. Formation  
San Andres

12. Rotary or C.T.  
Rotary & CT

13. Elevations (Show whether DF, RT, GR, etc.)  
4079 GR

14. Kind & Status Plug. Bond  
Statewide

15. Drilling Contractor  
Artesia Fishing Tool

16. Approx. Date Work will start  
09/05/91

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
14 3/4"	10 3/4"	40.5	900'	375 Sx	Surface
9 1/2"	7"	23	3300'	150 ax	
6"	4 1/2" liner	11.6	(275) 3100-3375'	50 ax	

It is proposed to drill the above captioned well w/rotary tools to a depth of 3300', and set 7" csg to surface. Move in cable tool rig and drill to a depth of 3375'. If commercial production is indicated, a 250' 4 1/2" csg liner will be run and cemented.

Blow-out Prevention: 10" 900 Double Shaffer 3000# will be used.

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

*Lisa L. Jennings*

TITLE Production Analyst

DATE 08/06/91

TYPE OR PRINT NAME

Lisa L. Jennings

TELEPHONE NO. 505-622-7330

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

AUG 13 1991

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator <b>Hanson Operating Company</b>			Lease <b>Presler Lake</b>		Well No. <b>1</b>
Unit Letter <b>E</b>	Section <b>7</b>	Township <b>9 South</b>	Range <b>30 East</b>	County <b>Chaves</b>	
Actual Footage Location of Well: <b>1980</b> feet from the <b>North</b> line and <b>660</b> feet from the <b>West</b> line					
Ground level Elev. <b>4079</b>		Producing Formation <b>San Andres</b>		Pool <b>Cato</b>	Dedicated Acreage: <b>40</b> 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.?

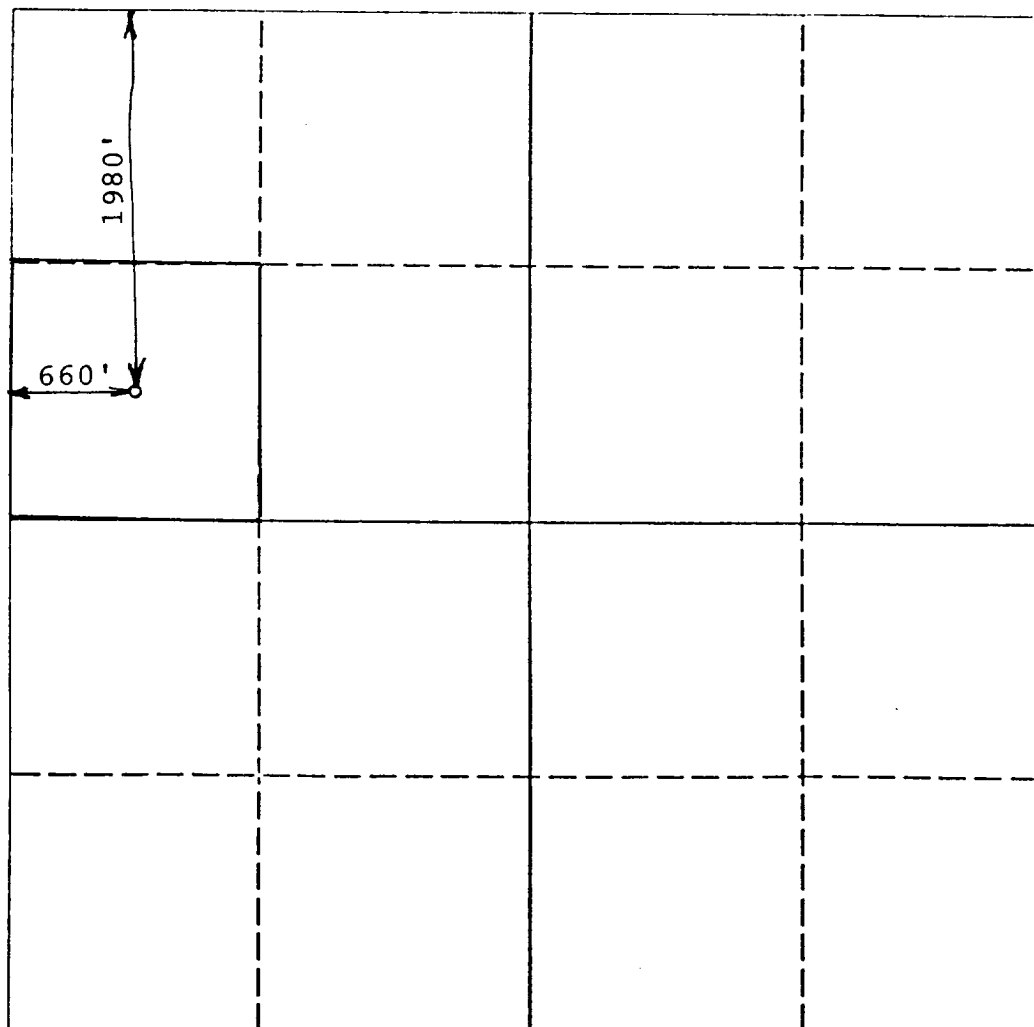
☐ Yes

☐ 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.

*Lisa L. Jennings*  
Signature

**Lisa L. Jennings**  
Printed Name

Production Analyst

Position

**Hanson Operating Co., Inc.**  
Company

**08/06/91**  
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

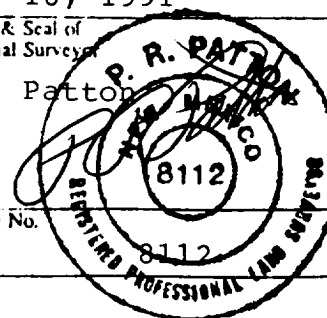
**July 18, 1991**

Signature & Seal of  
Professional Surveyor

**P.R. Patton**

Certificate No.

**8112**



16-27-11  
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