STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

30-005-21104

Form C-101
Revised 10-1-78

5A. Indicate Type of Lease: STATE [X] FEE [ ]

5. State Oil & Gas Lease No.: K-4495

Amended

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

b. Type of Well: DRILL [X] DEEPEN [ ] PLUG BACK [ ]
OIL WELL [X] GAS WELL [ ] OTHER SINGLE ZONE [ ] MULTIPLE ZONE [ ]

7. Unit Agreement Name:

8. Farm or Lease Name: New Mexico BX State

2. Name of Operator: Dakota Resources, Inc. (I)

9. Well No.: 8

3. Address of Operator: 310 W.Wall, Suite 814, Midland, TX 79701

10. Field and Pool, or Wildcat: Tobac - Penn

4. Location of Well: UNIT LETTER N LOCATED 766 FEET FROM THE South LINE AND 1874 FEET FROM THE West LINE OF SEC. 16 TWP. 8S RGE. 33E NMPM

12. County: Chaves

19. Proposed Depth	19A. Formation	20. Rotary or C.T.
9100	Bough "C"	Rotary

21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start
4382 .4 GL	Blanket	Sitton Drilling	1 - 15 - 92

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2"	13 3/8"	54.50	300	300	Circ.
12 1/4"	9 5/8"	47#	2850	1200	Circ.
7 7/8"	5 1/2"	17#	9000	1500	2500'

To change well location

Per Form C-101 Amended

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 Sam Mayhew Title Vice President Date 11/14/91

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE NOV 18 1991

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval Date Unless Drilling Underway

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-102
Revised 1-1-89

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator	Lease	Well No.
DAKOTA RESOURCES Inc. (I)	NEW MEXICO STATE BX ~~BX~~	8

Unit Letter	Section	Township	Range	County
N	16	8 SOUTH	33 EAST NMPM	CHAVES

Actual Footage Location of Well:
1874' feet from the WEST line and 766' feet from the SOUTH line

Ground level Elev.	Producing Formation	Pool	Dedicated Acreage:
4382.4	Penn (Bough C)	Tobac Penn	80 Acres

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

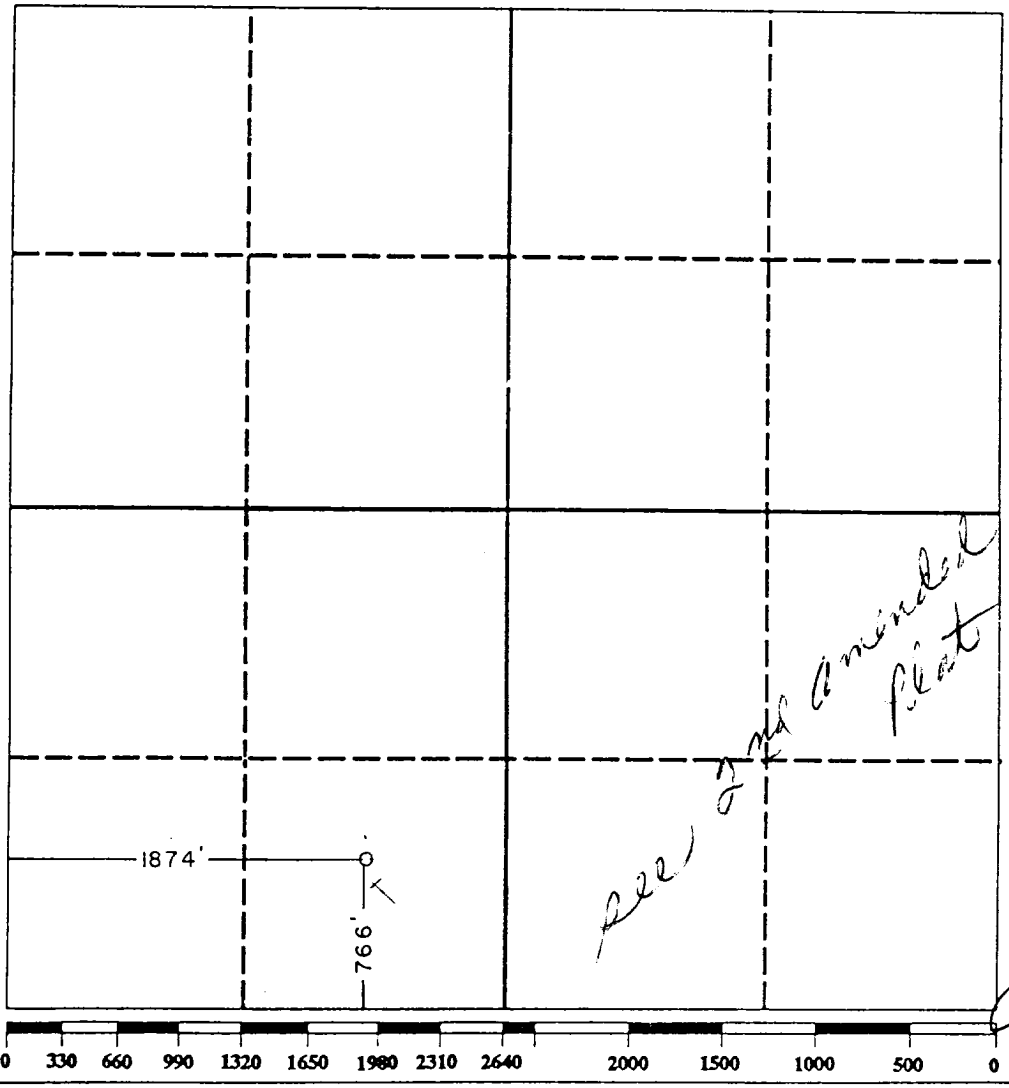
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. If more than one lease of different ownership is dedicated to the well, have the 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 neccessary. _____

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 in true and complete to the best of my knowledge and belief.

Pam Morphew
Signature

Pam Morphew
Printed Name

Vice President
Position

Dakota Resources, Inc. (I)
Company

NOV. 14, 1991
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 supervison, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
11-7-91

Signature & Seal of Professional Surveyor

Certificate No. JOHN W. WEST 676
RONALD J. EIDSON 3239

125830