

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-101
Revised March 17, 1999

Submit to appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address Hal J. Rasmussen 550 W. Texas Suite 200 Midland, Tx 79701		² OGRID Number 9809
		³ API Number 30 -025-07258
³ Property Code 32165	⁵ Property Name Reed Estate	⁶ Well No. # 1

⁷ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	22	15S	38E		1980	South	1980	East	Lea

⁸ Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

⁹ Proposed Pool 1

Medicine Rock Devonian

¹⁰ Proposed Pool 2

¹¹ Work Type Code E	¹² Well Type Code O	¹³ Cable/Rotary R	¹⁴ Lease Type Code P	¹⁵ Ground Level Elevation 3720
¹⁶ Multiple N	¹⁷ Proposed Depth 12848	¹⁸ Formation Devonian	¹⁹ Contractor Unknown	²⁰ Spud Date ASAP

²¹ Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
17 1/2	13 3/8	48#	332	400	Surface-In Place
12 1/4	9 5/8	36# & 40#	4860	2100	Surface-In Place
8 3/4	5 1/2	17#,20#,23#	12848-4700	770	4700ft-

²² Describe the proposed program. If this application is to DEEPEN or PLUG BACK, give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

Hal J. Rasmussen proposes to re enter well plugged by Atlantic Richfield in 1972. Cement plugs will be drilled out to PBTD of 12775 ft.
5 1/2" 17# and 20# casing will be run to top of 5 1/2" casing at 8130ft and tied back in 9 5/8 to 4700 ft. Casing will be cemented with 750 sx Class H cement
3000 psi BOP will be used during re entry operations.
Fresh water and gel will be used as hole conditions dictate.

Permit Expires 1 Year From Approval
Date Unless Drilling Underway
Re-Entry

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Michael S. Prichard*
Printed name: Michael Prichard

Title: Agent

Date: 4/1/03

Phone: (915) 687-1664
Greg Rasmussen

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Conditions of Approval:

Attached ☐

ORIGINAL SIGNED BY
PAUL F. KAUTZ
PETROLEUM ENGINEER
Expiration Date:

APR 01 2003

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State of New Mexico

Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102

Revised August 15, 2000

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-07258		² Pool Code 45480		³ Pool Name Medicine Rock Devonian	
⁴ Property Code 32165		⁵ Property Name Reed Estate			⁶ Well Number #1
⁷ OGRID No 9809.		⁸ Operator Name Hal J. Rasmussen			⁹ Elevation 3720

¹⁰ Surface Location

UL or lot no J.	Section 22	Township 15S	Range 38S	Lot Idn	Feet from the 1980	North/South line South	Feet from the 1980	East/West line East	County Lea
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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¹² Dedicated Acres 40	¹³ Joint or Infill N	¹⁴ Consolidation Code	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

¹⁶	¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Signature Michael Prichard Printed Name Agent Title 3/27/2003 Date	
	¹⁸ 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 belief. Date of Survey Signature and Seal of Professional Surveyor: See original plat filed 8/1/1961 Certificate Number	