

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)

30-025-25379

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

K-6666

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 ☐ MULTIPLE ZONE ☐

7. Lease Name or Unit Agreement Name

AM000 STATE #1

2. Name of Operator

WESTERN OIL PRODUCERS, INC.

8. Well No.

1

3. Address of Operator

P.O. BOX 1498 ROSWELL, NEW MEXICO 88201

9. Pool name or Wildcat

MALJAMAR MORROW Cisco

4. Well Location

Unit Letter M : 660 Feet From The SOUTH Line and 660 Feet From The WEST Line

Section 28 Township 16S Range 33E NMPM LEA County

10. Proposed Depth

11,800

11. Formation

CIS00

12. Rotary or C.T.

P.U.

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

4218.2 GR

14. Kind & Status Plug. Bond

STATE WIDE

15. Drilling Contractor

PULLING UNIT

16. Approx. Date Work will start

SEPTEMBER 20, 1991

17.

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	48#	1,000	600 SX	CIBC
11"	8 5/8	24 TO 32#	4,400	250 SX	3500
7 7/8	5 1/2	17 TO 20#	11,800	300 SX	10,000

Set CIBP 12,900' and blank off Morrow and Atoka gas zones, recompleat and perforate 11,500' to 11,508' and 11,012' to 11,020', 2-.43 shots per foot total. 32 holes, acidize and put on production.

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

ARNOLD NEWKIRK

TITLE VICE PRESIDENT

DATE 9-13-91

TYPE OR PRINT NAME

505-623-3131
TELEPHONE NO.

(This space for State Use) APPROVED BY JERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

Workover

SEP 17 1991

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

State of New Mexico
Department of Geology, Minerals and Natural Resources

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

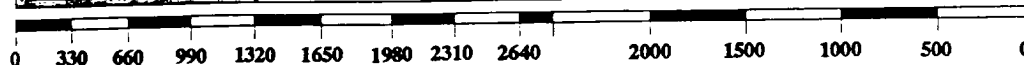
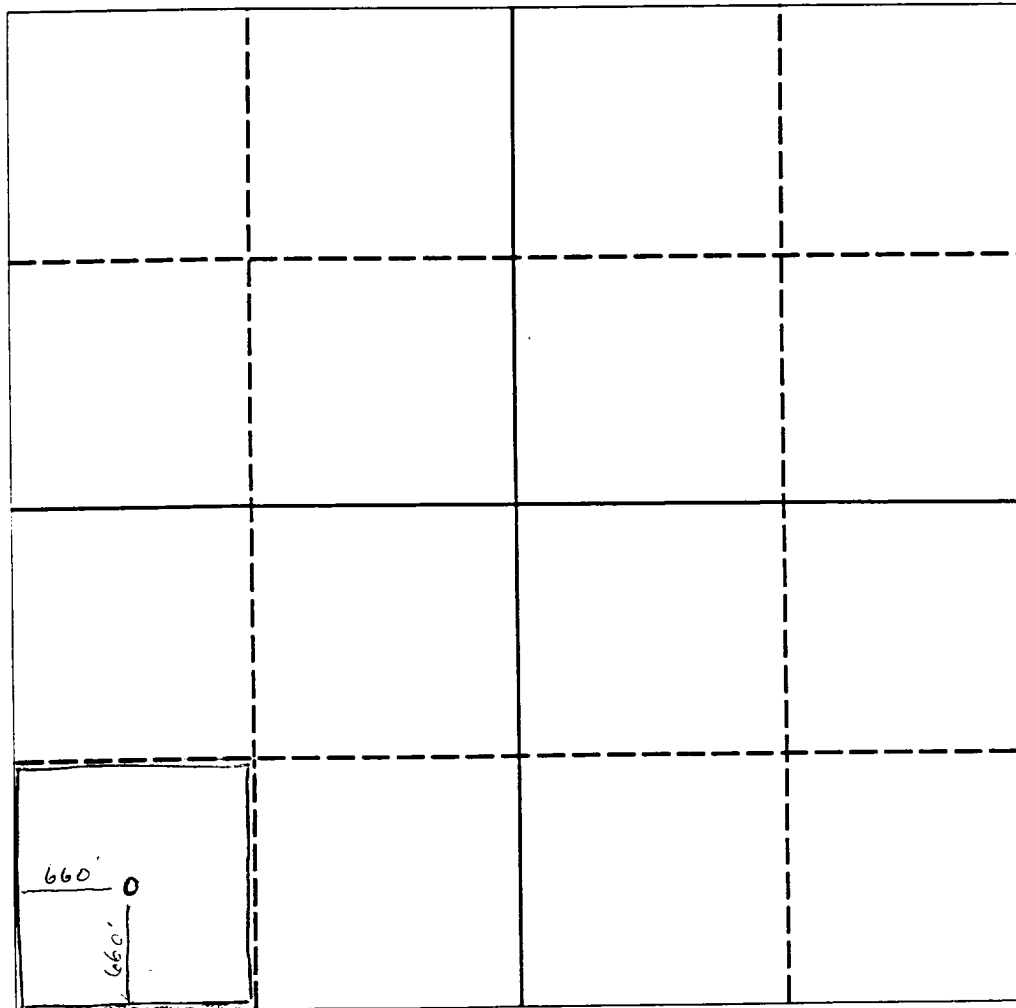
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator WESTERN OIL PRODUCERS, INC.			Lease AMOCO STATE		Well No. 1
Unit Letter M	Section 28	Township 16 SOUTH	Range 33 EAST	County NMPM LEA	
Actual Footage Location of Well: 660 feet from the SOUTH line and 660 feet from the WEST line					
Ground level Elev. 4218.2	Producing Formation CTSC00		Pool MALJAMAR MORRIS	Dedicated Acreage: 40 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.

Arnold Newkirk

Signature

ARNOLD NEWKIRK

Printed Name

VICE PRESIDENT

Position

WESTERN OIL PRODUCERS, INC.

Company

SEPTEMBER 13, 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 supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

Signature & Seal of Professional Surveyor

Certificate No.