

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 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

API NO. (assigned by OCD on New Wells)
30025298170
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work: DRILL <input type="checkbox"/> REPAIR <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>			7. Lease Name or Unit Agreement Name Christmas		
b. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>			8. Well No. 1		
2. Name of Operator William C. Bahlburg			9. Pool name or Wildcat Unknown Wildcat wolfcamp		
3. Address of Operator 14875 Landmark Blvd., Suite 216, Dallas, TX 75240			4. Well Location Unit Letter D : 1200 Feet From The North Line and 600 Feet From The West Line		
Section 7 Township 16S Range 37E NMPM Lea County			10. Proposed Depth 11,000 ft		
11. Formation Permopenn			12. Rotary or C.T. Rotary		
13. Elevations (Show whether DF, RT, GR, etc.) 3856.9 GR		14. Kind & Status Plug Bond Single well cash		15. Drilling Contractor Clarke	
16. Approx. Date Work will start 10/1/92		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*	68	373	395	Surface
11*	8-5/8*	32	4585	1600	Surface
7-7/8	5-1/2	17 & 20	11,000	200	9800

Re-enter wellbore and clean out hole to 11,000 ft. using pulling unit, reverse circ. unit and 7 7/8" bit.

*Surface and intermediate casing are presently in hole per Form C-103 filed by previous Operator.

Run 5 1/2" csg. to TD. Cement with approx. 200 sks class H cement.

Perforate 10,600 to 10,700ft. (approx.) and production test.

Put well to production or P&A if completion attempt unsuccessful.

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 William C. Bahlburg TITLE Owner/Individual DATE 9/25/92
TYPE OR PRINT NAME William C. Bahlburg TELEPHONE NO. 214/991-9541

(This space for State Use)

ORIGINAL SIGNED BY UPRI SECTION
DEPARTMENT OF ENERGY

SEP 26 1992

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

SEE ATTACHED LETTER

Permit Expires 6 Months From Approval
Date Unless ~~Drilling~~ Underway.

Re-entry

RECEIVED

SEP 28 1992

CCD HOBBS OFFICE

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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator William C. Bahlburg			Lease Christmas		Well No. 1
Unit Letter D	Section 7	Township 16S	Range 37E	County Lea	

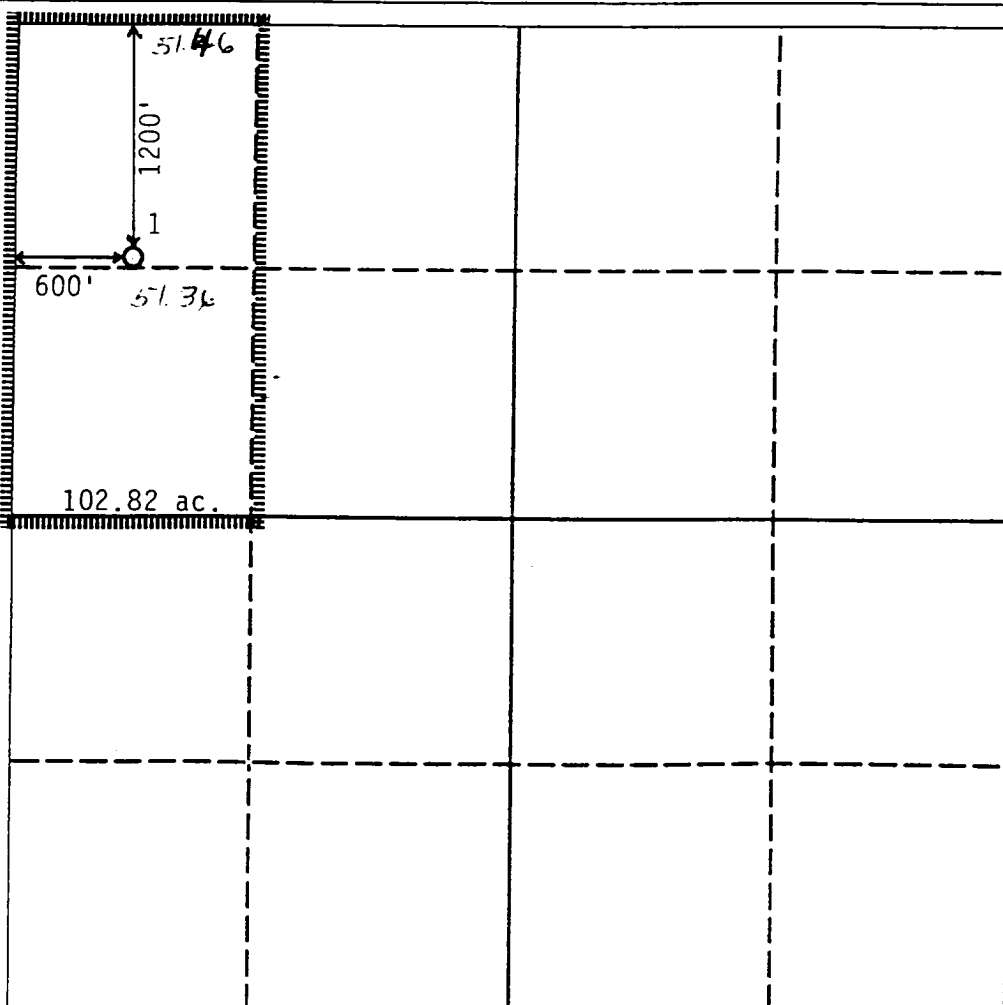
Actual Footage Location of Well:

1200 feet from the North line and 600 feet from the West line	Ground level Elev. 3856.9	Producing Formation Bonn. Wolfcamp	Pool Lovington Penn. NE	Dedicated Acreage 51.46
				102.82 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 Lease pooling provisions

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.

Signature

Printed Name

William C. Bahlburg

Position

Individual/Owner

Company

Individual

Date

9/28/92

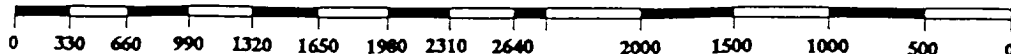
SURVEYOR CERTIFICATION

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.



RECEIVED
SEP 28 1992
OCD HOBBS OFFICE