

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)

30-025-30554

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-0119

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

Yates State

2. Name of Operator

W. A. Moncrief, Jr.

3. Address of Operator

400 Metro Bldg Midland, Texas 79701

8. Well No.

2

9. Pool name or Wildcat

Lovington Penn NE

4. Well Location

Unit Letter H : 1980 Feet From The North Line and 510' Feet From The East Line

Section 30

Township

16S

Range

37E

NMPM

Lea

County

10. Proposed Depth

11,300'

11. Formation

Strawn

12. Rotary or C.T.

Rotary

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

3817 GD,

14. Kind & Status Plug. Bond

*\$50,000 blanket bd.

15. Drilling Contractor

Peterson Drlg. Co.

16. Approx. Date Work will start

ASAP

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# H-40	400'	400	circulate
11"	8 5/8"	32# K-55	4,200'	900	circulate
7 7/8"	5 1/2"	15.5# N-80	11,300'	as necessary to	be determined

- (1) Drill 17 1/2" hole to 400'+ using spud mud and fresh water.
- (2) Run 13 3/8" casing at 400'+ and circulate cement. WOC 18 hrs.
- (3) Drill 11" hole to 4200'. Drill salt section from 2200'+ to 4200' with saturated brine.
- (4) Run 8 5/8" casing at 4200' and circulate cement. WOC 18 hrs.
- (5) Drill 7 7/8" hole to T.D. using fresh water system. Operator plans to mud up at 10,800'+ with mw of 8.9# to 9.2#, viscosity 34 to 36 and water loss 10-12 to total depth.
- (6) Run open hole logs.
- (7) Run 5 1/2" casing and cement as necessary. Blow out preventer diagram is attached.

* Hartford Insurance Company.

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

Dewey E. Thornton

TITLE

Exploration Manager

DATE 2-8-89

TYPE OR PRINT NAME

Dewey E. Thornton

TELEPHONE NO. 915/682-1762

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

FEB 13 1989

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

RECEIVED

FEB 10 1999

OCD
HOBBS OFFICE

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WELL LOCATION AND ACREAGE DEDICATION PLAT
All Distances must be from the outer boundaries of the section

Operator W. A. Moncrief, Jr.		Lease Yates State		Well No. 2
Unit Letter H	Section 30	Township 16 South	Range 37 East	County Lea
Actual Footage Location of Well: 1980 feet from the north line and 510 feet from the east line				
Ground level Elev. 5817.0	Producing Formation Strawn	Pool Lovington Penn. NE	Dedicated Acreage: 80 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- 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.

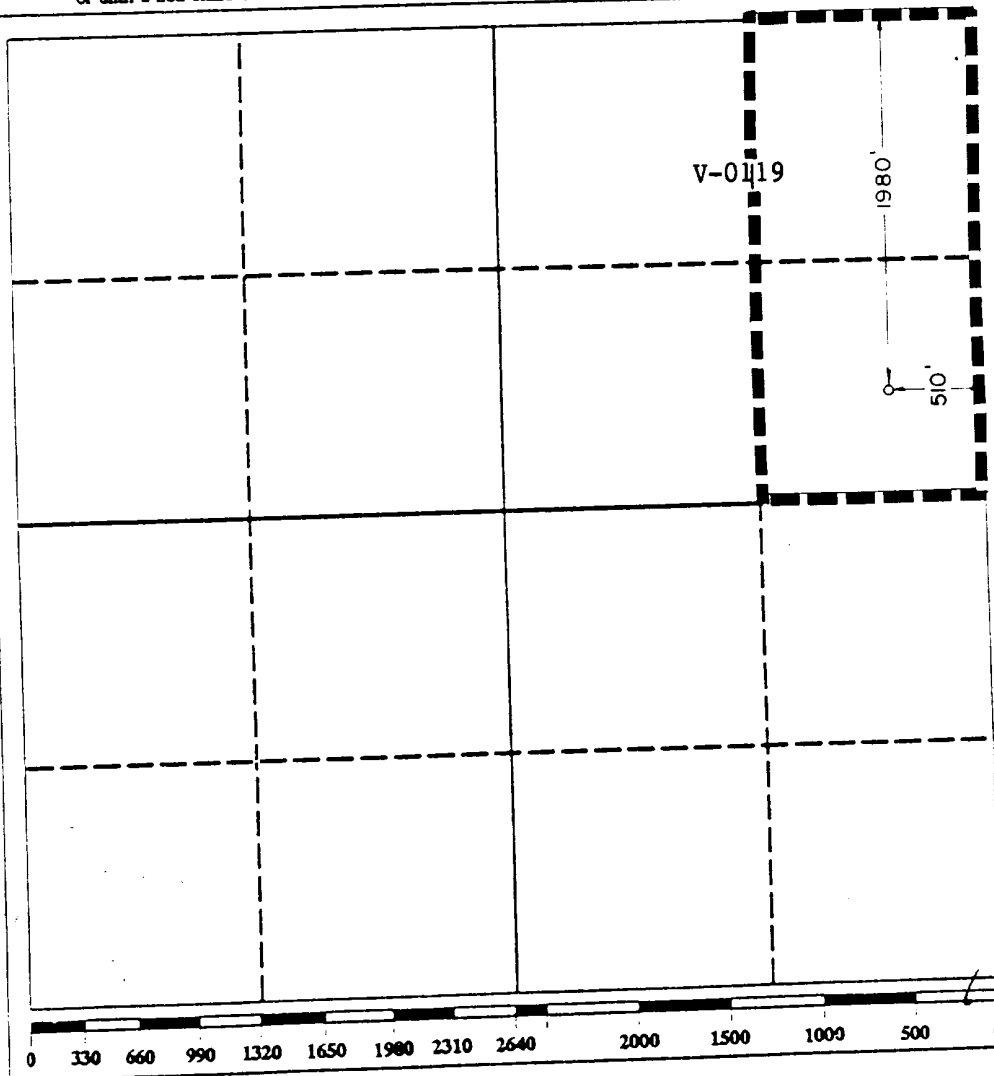
Signature
Dewey E. Thornton
Printed Name
Dewey E. Thornton
Position
Exploration Manager
Company
W. A. Moncrief, Jr.
Date
2-8-89

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
January 25, 1989

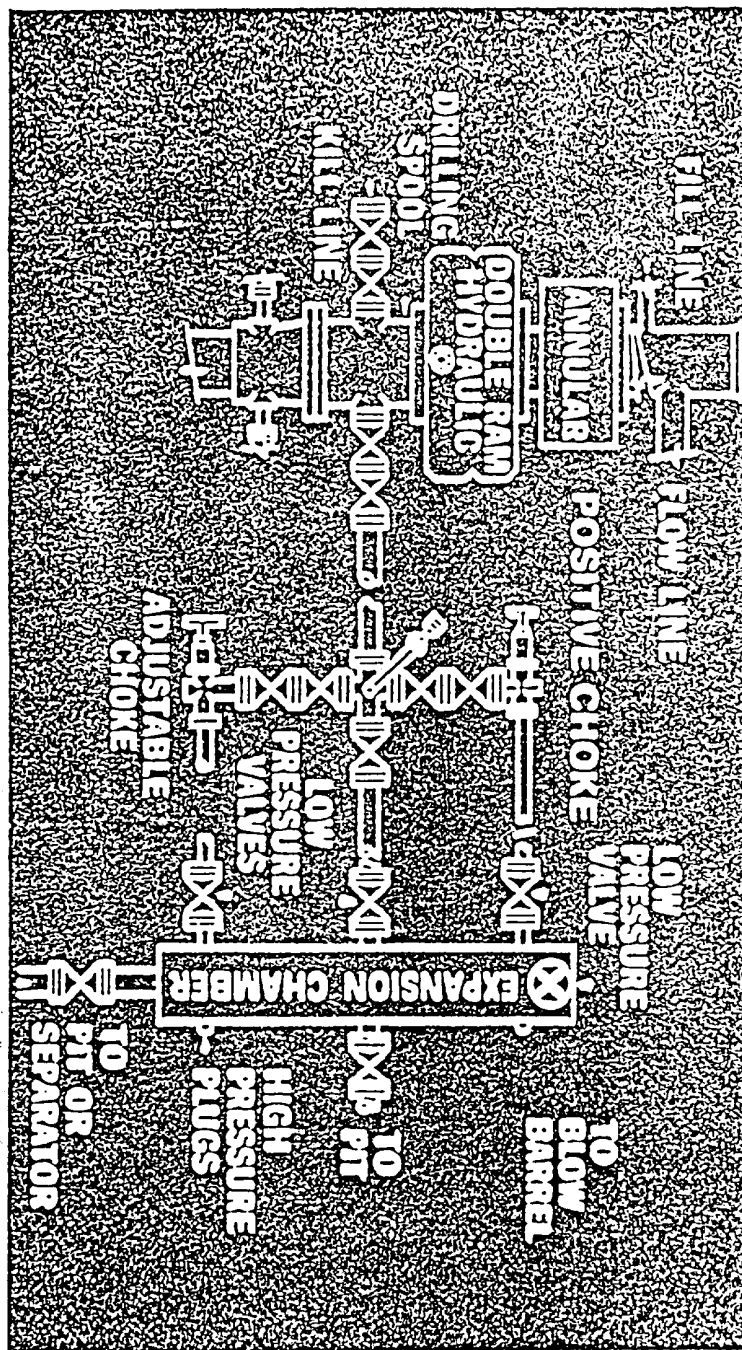
Signature of Professional Surveyor
John W. West
Professional Engineer
No. 1111
Certificate No. 1111
John W. West



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PETERSON DRILLING COMPANY
 Rtg. #

5,000# Working Pressure



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