

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)

30-025-30792

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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 ☐

2. Name of Operator

Conoco Inc.

3. Address of Operator

P.O. Box 460 - Hobbs

7. Lease Name or Unit Agreement Name

Houston

8. Well No.

2

9. Pool name or Wildcat

North Shoobar Strawn

4. Well Location

Unit Letter

C

: 2085 Feet From The West

Line and 555

Feet From The North

Line

Section

18

Township

15S 16E

Range

36F

NMPM

Lea

County

10. Proposed Depth

11,550

11. Formation

Strawn

12. Rotary or C.T.

Rotary

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

3953.6

14. Kind & Status Plug Bond

Blanket

15. Drilling Contractor

NA

16. Approx. Date Work will start

4-1-90

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"	13-7/8"	48#	0-500'	263 SxS.	Circ. to surface
11"	8-5/8"	32#	0-4750'	756 SxS.	Circ. to surface
7-7/8"	5-1/2"	17#	0-11,550'	1st stage - 413 SxS. 2nd stage - 903 SxS.	Circ. to surface

It is proposed to drill a straight hole to a TD of 11,550' and complete in an undesignated Strawn formation. See attachments for location plat and BOP specs.

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

W.W. Baker

TITLE

Administrative Supervisor

DATE

2-6-90

TYPE OR PRINT NAME

W.W. Baker

TELEPHONE NO.

397-5800

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

FEB 09 1990

CONDITIONS OF APPROVAL, IF ANY:

100-100000

FEB 3 1990

170
100-100000

Submit to Appropriate
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Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator CONOCO INC.		Lease HOUSTON		Well No. 2
Unit Letter C	Section 18	Township 16 SOUTH	Range 36 EAST NMPM	County LEA
Actual Footage Location of Well: 555 feet from the NORTH line and 2085 feet from the WEST line				
Ground level Elev. 3953.6	Producing Formation Strawn	Pool North Shreeber Strawn	Dedicated Acreage: 160 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.

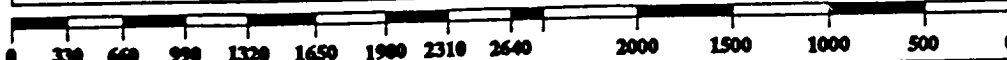
Signature
W.W. Baker
Printed Name
W.W. Baker
Position
Adm. Supervisor
Company
Conoco Inc.
Date
February 6, 1990

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 24, 1990
Signature & Seal of
Professional Surveyor

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



RECEIVED

FEB 8 1990

OCD
MOBBS OFFICE