£ istrict l PO Box 1980, Hobbs, NM 88241-1980

PO Drawer DD, Artesia, NM 88211-0719 District III

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION PO Box 2088

Form C-101 Revised February 21, 1994 Instructions on back Submit to Appropriate District Office State Lease - 6 Copies

1000 Rio Brazos I District IV	Rd., Aztec.	NM 87410		Santa Fe, NM 87504-2088						Fee Lease - 5 Copies		
District IV PO Box 2088, San	nta Fe, NM	87504-2088								AMEN	DED REPORT	
APPLICA	MOIT.	FOR PI	ERMIT '	TO DRI	LL, RE-EN	ITER, DE	EPE	N, PLUGB	ACK,	, OR AI	DD A ZONE	
	****				ame and Address.						CRID Number	
Med	allion	Produ	ction C	ompany					1	140	80 <u>5</u>	
713	30 S. L	Lewis Av	ve., Su						1	1	API Number	
Tu1	sa, OK							_		30 - 0	25-32907	
-	erty Code		⁵ Property Name								' Well No.	
1690	<u> </u>		State o	f New M	Mexico "35"						11	
⁷ Surface Location												
UL or lot no.	Section	Township	`	Lot idn	Feet from the	North/South	line	Feet from the		West line	County	
<u></u>	35	16S	34E	<u></u> '	1980	N		1980	E		Lea	
	⁸ Proposed Bottom Hole Location If Different From Surface											
UL or lot no.	Section	Township		Lot Idn	Feet from the	North/South I		Feet from the		West line	County	
	'	<u></u>	<u> </u>	<u> </u>	<u> </u>	<u></u>						
c Vemn	' A+	_	osed Pool 1				_	14 Propos	sed Pool 2	2		
Э кеши	itz nu	oka-Moi	rrow									
11 sars, 7					***							
	Type Code		" Well Type		13 Cable/	•		14 Lease Type Coo	de	1	d Level Elevation	
	N		G			R		S		405		
	ulti ple No		12,85	-	Atoka-Mor			"Contractor Pending			Spud Date 1 6, 1995	
²¹ Proposed Casing and Cement Program												
Hole Si	ize	Cas	sing Size		ng weight/foot	Setting De			f Cement	F	Estimated TOC	
17-1/2		13-3/			48	400	<u> </u>	425			urface	
12-1/4		9-5/	/8		40	4600		1350	*		urface	
7-7/8		5-1/	2	1	17	12,800	12,800				1,300	
								595				
							_			T		
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.												
SEE DRILLING PROGNOSIS ATTACHED												
Permit Expires 6 Months From Approval												
				•			∤p þi	rovar				
			Date :	Uniess	Drilling Ur	iderway.						
		1 - 4										
I hereby certify of my knowledge			en above is u	rue and compi	lete to the best	OIJ	L C	ONSERVAT	ΓΙΟΝ	DIVISI	ON	
Signature:	~ 1	Frais	* · · · · · · · · · · · · · · · · · · ·		Ar			E SIGNED BY J				
Printed name:					—	itle:		STRICT SUPER		_		
Title:		Franci			11							
······································	Drilli	ng &	Comple	tion Mg		Approval Date: Approval Date:						
Date:	3/22/9	15	Phone:	918/491-	/11/ H	Conditions of Approval : Attached Attached						

Attached □

C-101 Instructions

Measurements and dimensions are to be in feet/inches. Well locations will refer to the New Mexico Principal Meridian.

IF THIS IS AN AMENDED REPORT CHECK THE BOX LABLED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT.

- Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.
- 2 Operator's name and address
- 3 API number of this well. If this is a new drill the OCD will assign the number and fill this in.
- 4 Property code. If this is a new property the OCD will assign the number and fill it in.
- 5 Property name that used to be called 'well name'
- 6 The number of this well on the property.
- 7 The surveyed location of this well New Mexico Principal Meridian NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD Unit Letter.
- 8 The proposed bottom hole location of this well at TD

9 and 10 The proposed pool(s) to which this well is beeing drilled.

- 11 Work type code from the following table:
 - N New well
 - E Re-entry
 - D Drill deeper
 - P Plugback
 - A Add a zone
- 12 Well type code from the following table:
 - O Single oil completion
 - G Single gas completion
 - M Mutiple completion
 - I Injection well
 - S SWD well
 - W Water supply well
 - C Carbon dioxide well
- 13 Cable or rotary drilling code
 - C Propose to cable tool drill
 - R Propose to rotary driff
- 14 Lease type code from the following table:
 - S State
 - P Private
- 15 Ground level elevation above sea level
- 16 Intend to mutiple complete? Yes or No
- 17 Proposed total depth of this well
- 18 Geologic formation at ID
- 19 Name of the intended drilling company if known.

- 20 Anticipated spud date.
- Proposed hole size ID inches, proposed casing OD inches, casing weight in pounds per foot, setting depth of the casing or depth and top of liner, proposed cementing volume, and estimated top of cement
- 22 Brief description of the proposed drilling program and BOP program. Attach additional sheets if necessary.
- The signature, printed name, and title of the person authorized to make this report. The date this report was signed and the telephone number to call for questions about this report.