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STATE OF NEW MEXICO

P.O. Box 1980, Hobbs, NM 88240

DISTRICT II

DISTRICT III

P.O. Drawer DD, Artesia, NM 888210

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Energy, Minerals and Natural Resources Department

Form C-101 Revised October 18, 1994 Instructions on back Submit to Appropriate District Office

State Lease - 6 Copies

Fee Lease - 5 Copies

OIL CONSERVATION DIVISION

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE 1 Operator Name and Advances PALADIN ENERGY CORP. 10290 Montroe Drive, Suite 301 Dallas, Texas 75229 30 - 0255 - 03150 4 Procent Code 22557 South Vaccuum Unit 3637 35 188 35 188 375 188 38 Proposed Bottom Hole Location II Different From Surface U. or ist No. 8 Proposed Bottom Hole Location II Different From Surface U. or ist No. 8 Proposed Bottom Hole Location II Different From Surface U. or ist No. 8 Proposed Bottom Hole Location II Different From Surface U. or ist No. 9 Proposed Proc 1 11 Work Type Code 12 Well Type Code 13 Caber/Rosiny 14 Leses Type Code 15 Cassing Size 12 Proposed Casing and Cement Program See Size 14 Proposed Casing and Cement Program See Size 15 Cassing Size 16 Cassing Size 16 Cassing Size 17 Proposed Casing and Cement Program See Size 18 Cassing Size 19 10,500° to plug off Vaccuum, Devortian, South. Run cement bond log to determine top of cement, if indicated RU Dowell Service and squeeze at 9000° and 8700°, test casing. RU wireline and perforate with 4" hollow carrier gun/2 shots per foot, 120 phase. PERFORATE 8592* TO 8902*, BONE SPRINGS FORMATION RU Dowell Service, pump 500 gallons 15% HCL with 40 ball sealer, flush with 2% KCL water, attempt to ball out perforations. RU and sweab back acid job. Put on production File and the lest inventor goes and sweab back acid job. Put on production File and Coment of the lest of the Conservation Division have been compiled in and that the indimination given allowed the best of my consequence and proposed for put of the best of my consequence and proposed for put of the best of my consequence and put of the best of my consequence	000 Rio Brazos	Rd., Aztec, N	NM 87410			O Pacheco			1 6	e Lease - 5 Copies
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January 26, 1999 314/654-0135 Attached				A445= 1 -	.465		l ·			
	Jar	nuary 26,	1999	314/654-0)135		Attached	<u> </u>		



District I

PO Box 1980, Hobbs, NM 88241-1980

811 South First, Artesia, NM 88210

District III

District II

1000 Rio Brazos Rd., Aztec, NM 87410

2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico Energy, Minerais & Natural Resources Department

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87505

Form C-102 Revised October 18, 1994

Instructions on back Submit to Appropriate District Office

State Lease - 4 Copies Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number						
	² Pool Code	³ Pool Name				
30-025-03150	61900	Vacuum; Bone Springs, South				
Property Code	² Pr	operty Name * Well Number				
-225557 R557	Soutl	h Vacuum Unit 35-1				
OGRID No.	¹ O _F	perator Name				
164070		Energy Corp. 'Elevation 3869'				
	10 C.	food I ami				

Surface Location

ı	UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County	7
Į	G	35	18S	35E		1980	North	1980	East	Lea	l
				11 7	77 .			<u> </u>			1

11 Bottom Hole Location If Different From Surface

	UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County		
i	12 Dedicated Acre		or infill 14	Consolidatio	a Code 15	Order No.		L			4	
	8040) N		U	1	R-1048						
	NO ALLON	LADIE	1777 1 00			·					- 1	

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED

	7	NDARD UNIT HAS B	EEN APPROVED BY	THE DIVISION
16		35-1	1980'	17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief Signature Ann Westberry Printed Name Manager, Corp, Support Title January 27, 1999 Date
				18SURVEYOR 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 belief. Date of Survey Signature and Scal of Professional Surveyer: Certificate Number