

N. M. COMMISSION
P. O. BOX 1296
HOBBBS, NEW MEXICO 88240
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN 1 CLIMATE*
(Other instructions on
reverse side)

30-025-25136
Form approved.
Budget Bureau No. 1004-0136
Expires August 31, 1985
RECEIVED

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

Lanexco, Inc.

3. ADDRESS OF OPERATOR

P.O. Box 1296 Jal, New Mexico 88252

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

660' FNL & 660' FWL

At proposed prod. zone

Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

10. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

16. NO. OF ACRES IN LEASE

160

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH
(Original 9900
10915)

20. ROTARY OR CABLE TOOLS
Workover Unit

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3633' KDB

22. APPROX. DATE WORK WILL START*

ASAP (When approved)

23.

Casing was left in well. ~~XXXXXXXXXX~~ PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17 1/2"	13 3/8"	48-68#	375	400 sx cement circulat
12 1/4"	9 5/8"	36#	4100	2700 sx TOC-70 ft.
8 3/4"	7" liner	23,26,29	3790-10915	1800 sx squeezed top of liner w/20

PROPOSED RE-ENTRY

Restore location.

Install anchors and test. Dig out cellar, and cut off dry hole marker.

Move in workover unit. Install wellhead and 3000# manual BOP.

Run bit and drill collars and clean out to approximately 9900'.

Perforate Bone Spring (approx. 9700'). Acidize and swab to evaluate.

If necessary frac Bone Spring.

If economical, run production equipment and place on production.

If not a commercial producer, plug well, remove all equipment, and
restore location to original condition.

**Plugs set: CIBP @10610', CIBP @10035 w/ 10sx cmt., CIBP @7900' w/6
sx cmt. 70 sx cmt. 3843-3700'. Cmt. retainer @2849'. CIBP @2600'.

35 sx cmt. @1008-902', 20 sx cmt. @62' to surface

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. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

Richard L. Stangor

TITLE Executive Vice Pres.

DATE July 6, 1989

(This space for Federal or State office use)

PERMIT NO.

Orig Signed by Richard L. Stangor

APPROVAL DATE

AREA MANAGER

CARLSBAD RESOURCE AG.

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL TO ANY:

ADDITIONAL REQUIREMENTS AND
SPECIAL STIPULATIONS

ATTACHED

*See Instructions On Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

RECEIVED

AUG 21 1999

OCD
HOBBS OFFICE

MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section

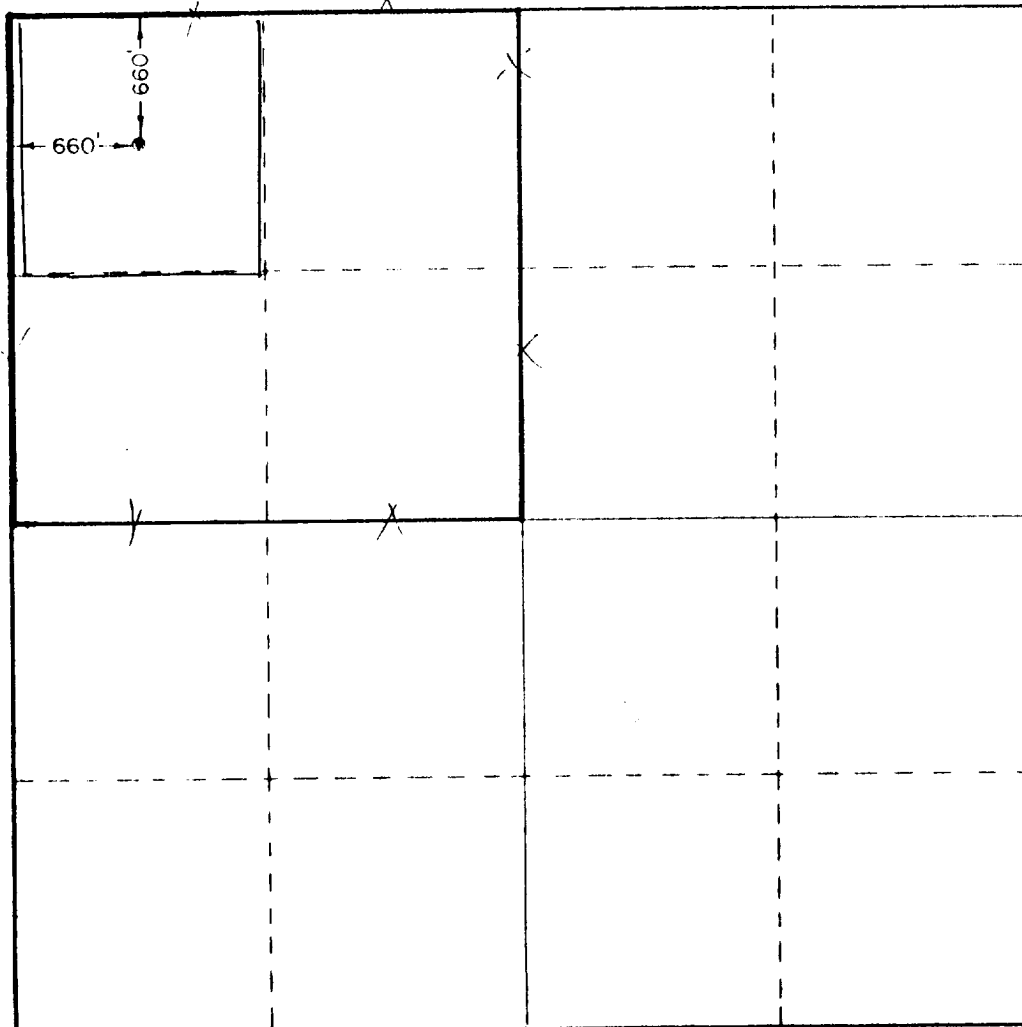
Owner LANEXCO, INC.			Lease Sloan Federal			Well No. 1		
Section D	Section 22	Township 19 South	Range 32 East	County Lea				
Actual Outside Location of Well:								
660 feet from the North line and			660 feet from the West line					
Ground Level Elev. 3612	Bone Spring		Lusk Bone Spring, East				Dedicated 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 interests 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 interests, has been approved by the Commission.



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 _____

Robert W. Lansford

Position _____

Executive Vice President

Company _____

LANEXCO, INC.

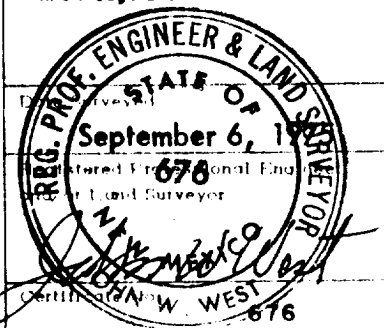
Date _____

June 29, 1989

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.

is true and correct to the best of my knowledge and belief



0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600