

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)

30-025-31344

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

NM-064944

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

Tijeras State

2. Name of Operator

Meridian Oil Inc.

8. Well No.

1

3. Address of Operator

P.O. Box 51810, Midland, TX 79710-1810

9. Pool name or Wildcat

South Corbin-Wolfcamp

4. Well Location

Unit Letter 0 : 1980 Feet From The East Line and 860-510 Feet From The South Line

Section 21 Township 18-S Range 33-E NMPM Lea County

10. Proposed Depth

11,550'

11. Formation

Wolfcamp

12. Rotary or C.T.

Rotary

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

3815.3

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

NA

16. Approx. Date Work will start

8-2-91

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#	370'	300 sxs	Surface
12-1/4"	8-5/8"	28 & 24#	2900'	1500 sxs	Surface
7-7/8"	5-1/2"	17 & 15.5#	11,550'	2100 sxs	TOC 2900'+

BOP PROGRAM: 13-5/8"-2M annular BOP to be installed on 13-3/8" csg. 11"-3M stack to be installed on 8-5/8" & left on for the remainder of drilling. Stack to consist of annular BOP, blind ram BOP, one pipe ram BOP. Test BOP's after setting 8-5/8" csg with an independent tester.

ESTIMATED TOPS: Rustler 1462', Yates 3068', Queen 4206', Delaware 5184', Bone Spring 7122', Bone Spring Sand 8600', Wolfcamp 10,907'.

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 Maria L. Perez TITLE Production Asst. DATE 7-30-91

TYPE OR PRINT NAME Maria L. Perez

TELEPHONE NO. 915-686-5767

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

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District Office
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Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator MERIDIAN OIL INC.			Lease TIJERAS STATE		Well No. 1
Unit Letter 0	Section 21	Township 18 SOUTH	Range 33 EAST	County NMPM	LEA
Actual Footage Location of Well: 1980 feet from the EAST line and 510 feet from the SOUTH line					
Ground level Elev. 3815.3	Producing Formation WOLFCAMP		Pool SOUTH CORBIN- WOLFCAMP		Dedicated Acreage: 80 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.

2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

3. 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

Printed Name

JOHN W. WEST

Position

AGENT

Company

MERIDIAN OIL INC.

Date

AUG. 1, 1991

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

AUG. 1, 1991

Signature & Seal of
Professional Surveyor

Certificate No.

JOHN W. WEST,

676

RONALD J. EIDSON,

3239



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

10-10-87

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RECEIVED

AUG 01 1991

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