

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)

30-025-31392

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

LH-1840

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

Corbin State

2. Name of Operator

Meridian Oil Inc.

8. Well No.

2

3. Address of Operator

P. O. Box 51810, Midland, Texas 79710

9. Pool name or Wildcat

South Corbin Wolfcamp

4. Well Location

Unit Letter H: 510 Feet From The East Line and 1980 Feet From The North Line

Section 16 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.)

3898.3' GR

14. Kind & Status Plug. Bond

Statewide

15. Drilling Contractor

NA yet

16. Approx. Date Work will start

Upon Approval

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#	400' +	425 sxs C	Surface
12-1/4"	8-5/8"	28#	2900' +	950 sxs C	Surface
7-7/8"	5-1/2"	17#	11,550'	600 sxs C&H	2500' est TO

Estimated Tops: Rustler 1470'  
Queen 4210'  
Delaware Sand 5700'  
Bone Spring 7000'  
Wolfcamp 10,800'

BOP:10"-5M BOP Stack.

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

9-19-91

TYPE OR PRINT NAME

Maria L. Perez

6906

TELEPHONE NO. 915-688-

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval  
Date Unless Drilling Underway.

199

Submit to Appropriate  
District Office  
State Lease - 4 copies  
Fee Lease - 3 copies

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
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

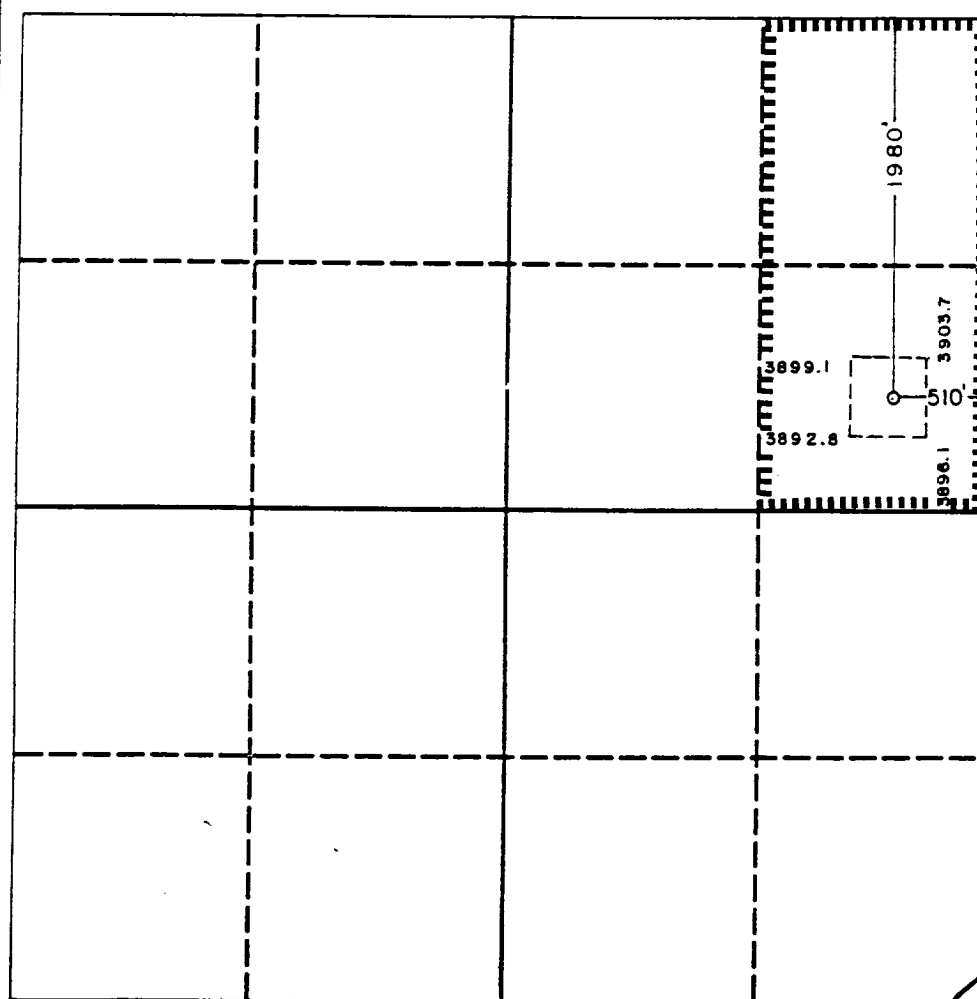
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator MERIDIAN OIL INC.			Lease SOUTH CORBIN STATE		Well No. 2
Unit Letter H	Section 16	Township 18 SOUTH	Range 33 EAST	County LEA	
Actual Footage Location of Well: 510 feet from the EAST line and 1980 feet from the NORTH line					
Ground level Elev. 3898.3	Producing Formation Wolfcamp	Pool South Corbin Wolfcamp		Dedicated Acreage: 80 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure 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.



<b>OPERATOR CERTIFICATION</b> I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
Signature	Maria L. Perez
Printed Name	Maria L. Perez
Position	Production Asst.
Company	Meridian Oil Inc.
Date	9-19-91
<b>SURVEYOR CERTIFICATION</b> 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	18-20-91
Signature & Seal of Professional Surveyor	NO. 676
Certificate No.	676
RONALD J. EIDSON, 3239	

PROCESSED  
SEP 20 1991  
GPO  
HOBBS 10000

BLOWOUT PREVENTION EQUIPMENT  
 10" 900s ALL FLANGED EQUIPMENT  
 5,000# WORKING PRESSURE - 10,000# TEST

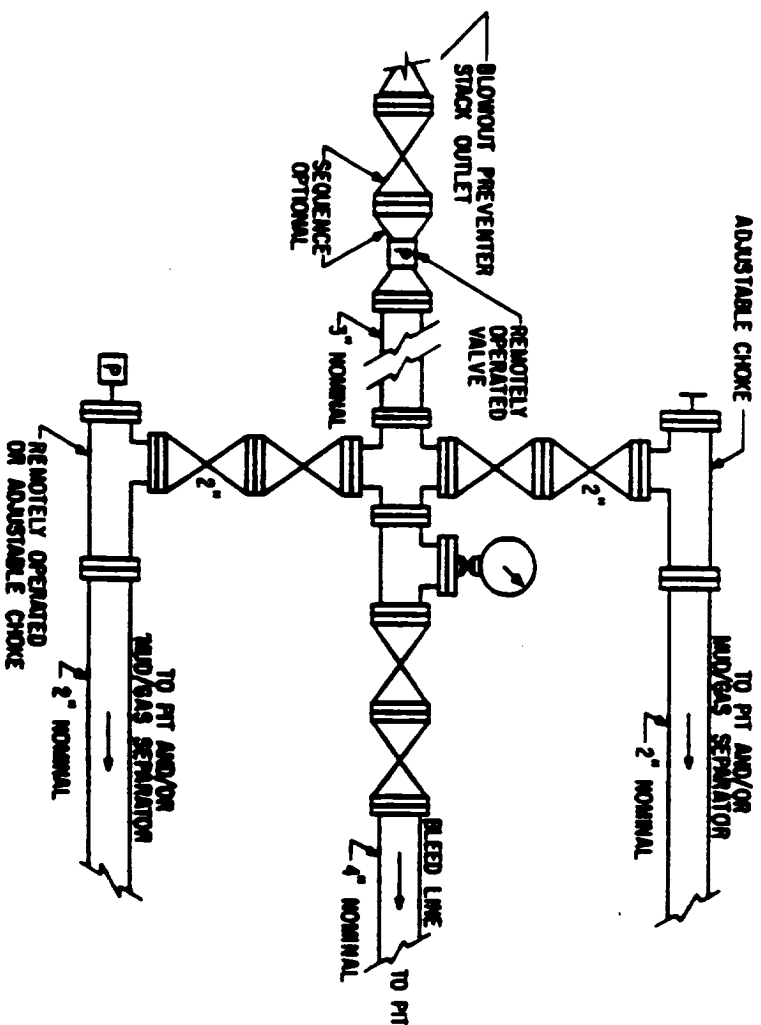
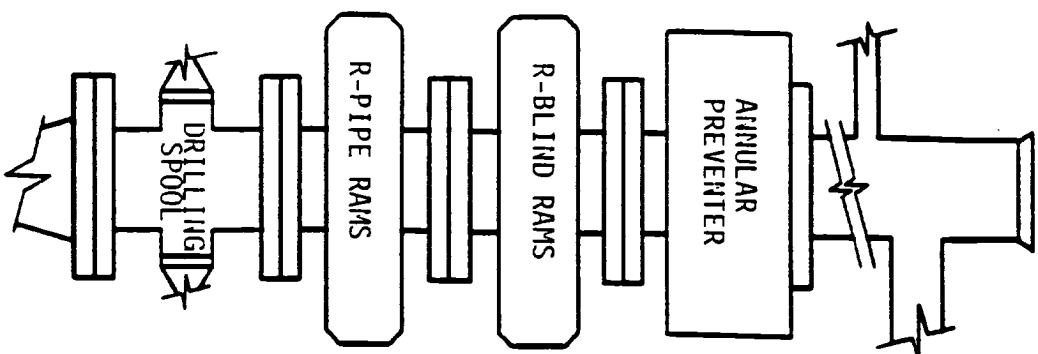


FIG. 3.A.2

TYPICAL CHOKE MANIFOLD ASSEMBLY FOR 5M  
 RATED WORKING PRESSURE SERVICE -  
 SURFACE INSTALLATION