

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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)

30-025-31894

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-3750

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

Maralo, Inc.

3. Address of Operator

P. O. Box 832, Midland, TX 79702

7. Lease Name or Unit Agreement Name

Bondurant 2 State

8. Well No.

2

9. Pool name or Wildcat

Buffalo Yates

4. Well Location

Unit Letter J : 2310 Feet From The South Line and 2310 Feet From The East Line

Section 2

Township

19 S

Range

32 E

NMPM

Lea

County

10. Proposed Depth

3700'

11. Formation

Seven Rivers

12. Rotary or C.T.

Rotary

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

3687.5

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

N.A.

16. Approx. Date Work will start

3-15-93

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE

SIZE OF CASING

WEIGHT PER FOOT

SETTING DEPTH

SACKS OF CEMENT

EST. TOP

12 1/4

8 5/8

54.5#

450'

350 sx Class C

Surface

7 7/8

5 1/2

15.5#

3700'

700 sx Cl. C w/

Surface

tail 200 sx 50/50

Poz.

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

Dorothea Owens

TITLE

Regulatory

DATE

February 8, 1993

TYPE OR PRINT NAME

Dorothea Owens

TELEPHONE NO. 915 684-7441

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FEB 12 1993

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

RECEIVED

FEB 09 1993

OCD HORNS OFFICE

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
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DISTRICT II
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DISTRICT III
1000 Rio Brazos Rd., Artec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

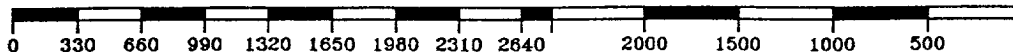
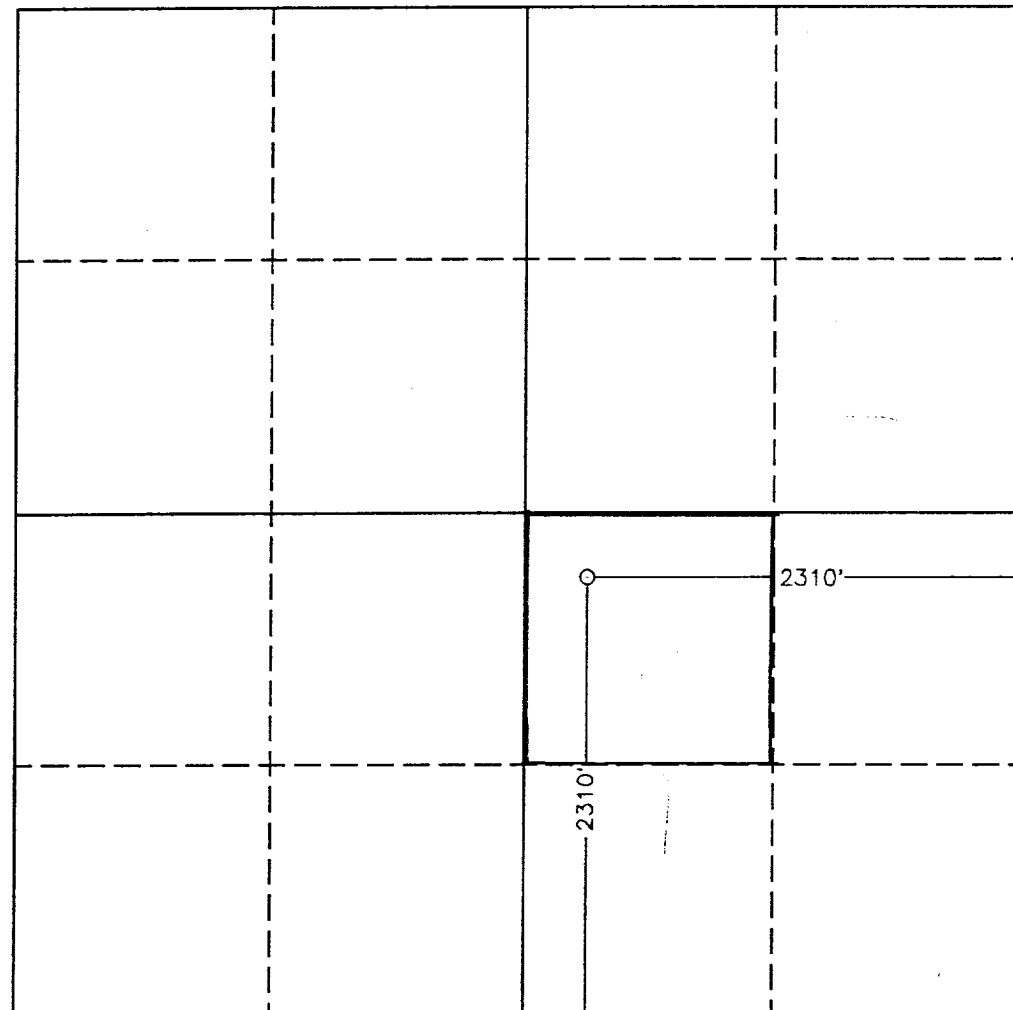
All Distances must be from the outer boundaries of the section

Operator MARALO, INC.			Lease BONDURANT 2 STATE		Well No. 2
Unit Letter J	Section 2	Township 19 SOUTH	Range 32 EAST NMPM	County LEA	
Actual Footage Location of Well: 2310 feet from the SOUTH line and 2310 feet from the EAST line					
Ground Level Elev. 3689.2	Producing Formation YATES		Pool BUFFALO YATES	Dedicated Acreage: 40 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hachure 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 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 of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary.) _____

No allowable will be assigned to the well unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

I hereby certify the the information
contained herein is true and complete to the
best of my knowledge and belief.

Signature

Dorothea Owens

Printed Name

DOROTHEA OWENS

Position

REGULATORY

Company

MARALO INC.

Date

FEBRUARY 8, 1993

SURVEYOR CERTIFICATION

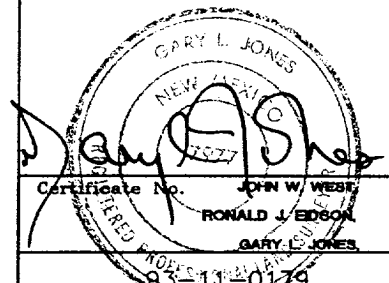
I hereby certify that the well location shown
on this plat was plotted from field notes of
actual surveys made by me or under my
supervision, and that the same is true and
correct to the best of my knowledge and
belief.

Date Surveyed

February 2, 1993

Signature & Seal of

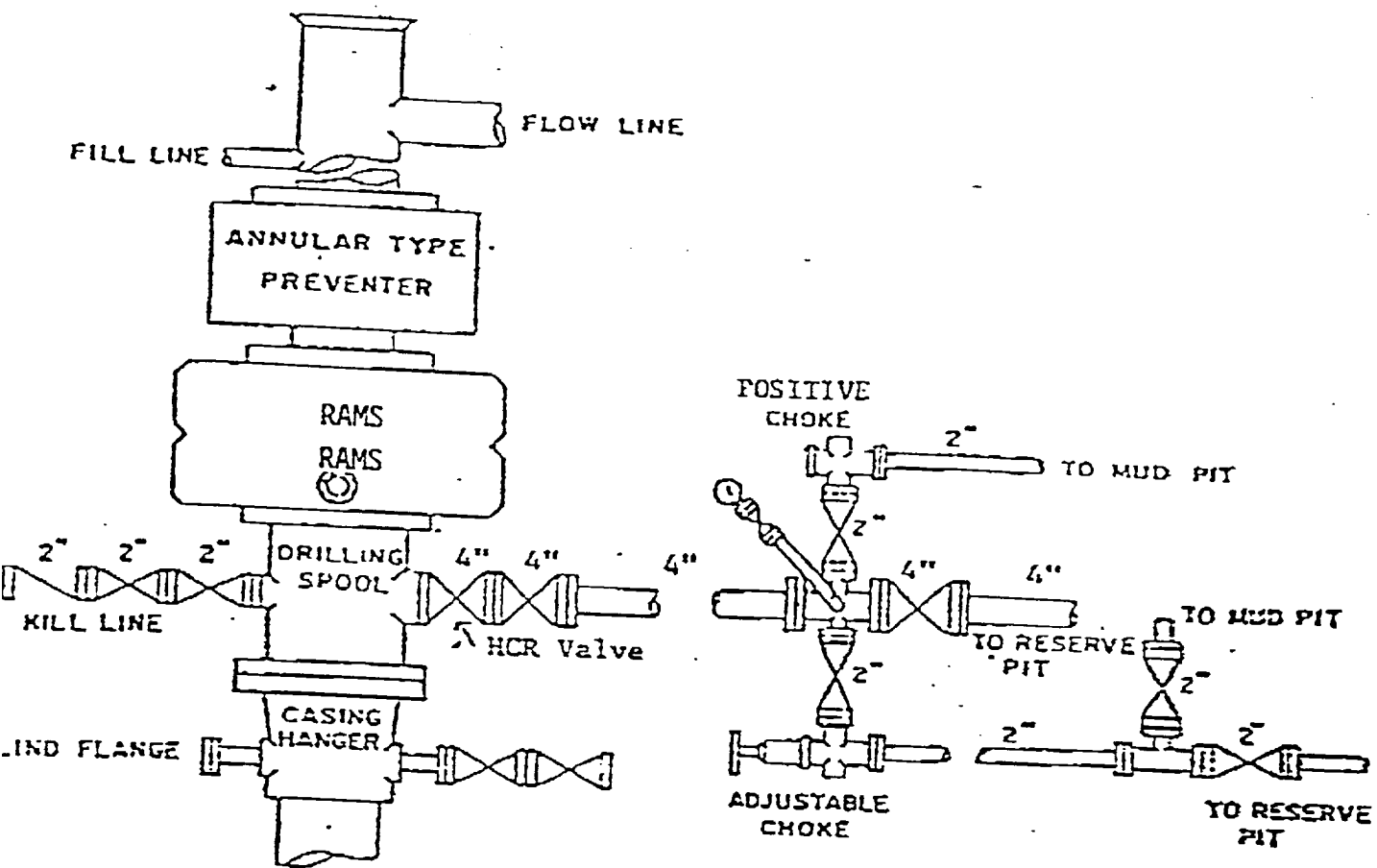
Professional Surveyor



RECEIVED

FEB 09 1993

OCD HOSEA OFFICE



BOP STACK

3000 PSI WORKING PRESSURE

BOP ARRANGEMENT