	PARTMENT	6	CONSERVAT			Form C-101 Revised 10-1-78		
DISTRIBUTION		SANTA FE, NEW MEXICO 87501				SA. Indica	te Type of Lease	
SANTA FE						BTATE		
FILE U.S.G.S.						.5. State Of	1 & Gas Lease No.	
LAND OFFICE								
OPERATOR						huuu	mmmm	
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK								
Type of Work			, onice, occi en,	OK I LOO DACK		7. Linit Ac	reement Name	
DRILL T	٦				(E			
Type of Well			DEEPEN	PLL	G BACK	A. Form or	Lease Name	
OIL X GAS WELL] ",			SINGLE X	AULTIPLE TU	V		
Name of Operator				10NE [11]	ZONE	Lawren		
Hamon Operating	Company	Pħ	one: 915/699-49	187		3. 1121 140.	, 1	
Hamon Operating Company Phone: 915/699-4987 Address of Operator							1 10. Field and Pool, or Wildcat	
3525 Andrews Hig	hway. Sui	te 105-	A. Midland. Tev	as 79703_50/9			-	
3525 Andrews Highway, Suite 105-A, Midland, Texas 79703-5048						S.E. Kn	owles Wolfcamp	
UNIT LET	TER	LO	CATED 00() 1	PEET FROM THE NOTE	1			
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660 FFFT FRA	WTHE West		10	170 2		//////		
	M THE West		NE OF SEC. 19	TWP. 17-5 RGE. 3	9-E NMPM			
	M THE West		ar or sec. 19	тир. <u>17-5</u> рас. 3	9-E ••••	12. County		
	M THE West		e or sec. 19	TWP. 17-5 RCE. 3	9-E NUPU	12. County Lea		
	<u>w the West</u>		ас от sec. 19	тир. <u>17-5</u> есс. <u>3</u>	9-E ****			
	× THE West			rwp. <u>17-S</u> acc. 3	9-E NUPU	Lea		
	× THE West			19. Froposed Depth	19.4 Formation	Lea	20. Rotary or C.T.	
				19. Froposed Depth 10,200'	19A Formation Wolfcamp	Lea	P.U.	
	С. () () () () () () () () () () () () () (21 A . Kind	6 Status Plug. Bond	19. Proposed Depth 10,200 ' 215. Drilling Contractor	19A Formation Wolfcamp	Lea	P.U. . Date Work will start	
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Elevations (Show whether D). 3670' GR - 3686'	F, kT, etc.) KB	21A. Kind Blat P CASING	& Status Plug. Bond nket in Force ROPOSED CASING AND WEIGHT PER FOOT	19. Proposed Depth 10,200' 21B. Drilling Contractor Pulling Unit O CEMENT PROGRAM SETTING DEPT	19A Formation Wolfcamp it	Lea 22. Approx May	P.U. Date Work will start 28, 1986 EST. TOP	
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4. Acidize and/or hydraulically fracture as needed.

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Tule_ District Operations Supt.	Date 5-23-86
TON	MAY 2 7 1986
	Months From Approval
	Tule_District Operations Supt.

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Permit Expires 6 Months Hom Appre Date Uniess Drilling Underway. .

NEW MEXICO OIL CONSERVATION COMMISSION WELL LOCATION AND ACREAGE DEDICATION PLAT

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Hamon Operating Company Lease Well No. Hamon Operating Company Township Hampe County D 19 17-S 30-E Lease Actual Footage Location of Well: Month Hampe County 660 feet from the North Hine and 660 feet from the Well No. Ground Level Clev. Producing Formation Pool County Dedicated Acreage: 3670 Wolfcamp S.E. Knowles Wolfcamp Dedicated Acreage:				الله الم	itances must be	from the c	uter boundarier	of the Sec	tion.		
name uper tring Company ()// Levrence "A" 1 D 19 17-5 180 as Constr D 19 17-5 180 as Les 660 form the North Inc and form the North form the North form the North form the Nor	Cherutor					1				Well No	
Description Towaitip Finance County D 19 17-5 39-E Lea Actual Properties Leasan of Weith finance Mest Inc. 660 free team the NOTTH Hun and 660 free team the West Inc. 3670 Wolfcamp S.E. Knowles Wolfcamp Description Accurate Acurate Acurat <td< td=""><td></td><td><u> </u></td><td></td><td>7</td><td> U</td><td>// Law</td><td>rence "A"</td><td>•.</td><td colspan="2"></td><td>1</td></td<>		<u> </u>		7	U	// Law	rence "A"	•.			1
Actual receivery Leven to Wait Item out 660 tent tem the West Item out 660 tent tem the West Item out 660 Actual receivery Low Actual receivery		1		Township	p	Ra	nje	Count	у У		
Actual residues because the line North Image of 660 test tens the North 3670 Wolf camp S.E. Knowles Wolf camp Defenses Accessed 40 Acc 1. Outline the accessed dedicated to the subject well by colored penal of hackbare 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 work): interest and royalty). 3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated different ownership station, indication, force-pooling, etc? If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if accessary). If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if accessary). CERTIFICATION I hereby certify that the information constrained on init, eliminating such interests, has been approved by the Commission constrained on init and interests have been coasolidated (by communitization, unitization, antitization, antiti at antiti anterest, as been approved by the Commis at				17-	S		3 0 -е		Lea		
Description provides provides the proof the train to the set of		ation (of Well;					·			
Defecting Templer Proof Proof Proof Proof Proof Proof Acc 1. Outline the acreage dedicated to the subject well by colored pencil of hackure marks on the plat below. 1. Image: Second Secon	660	feet	from the 1	lorth	line and	66	50	(ant (mm 1)	- West		
2010 WOILCAMP S.E. Knowles Wolfcamp 40 Acc 1. Outline the acroage dedicated to the subject well by colored peneil or hachure marks on the plat below. 1 Acc 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to workin interest and royalty). 3. M more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, force-pooling, etc? Yes No If answer is "yes," type of consolidation	Ground Level Elev.		Producing For	mation		Pool		reet non ti			
1. Outline the acroage dedicated to the subject well by colored pencil or hackure marks on the plat below. 2. If more than one lense is dedicated to the well, outline each and identify the ownership thereof (both as to workin interest and reports). 3. If more than one lense 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	3670		Wolfcan	np		l s.	E. Knowle	s Wolfe	amp		e:
 If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to workin 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	1 Outline the	e acr	cane dadias	tod to th							Acres
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 in 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. 6600-0 I beneby certify that the information consolidated (by communitization, unitization, uniti	 If more the interest an If more that 	an oi d roy n ong	ne lease is valty). e lease of d	dedicate	ed to the well	l, outlin dedicate	e each and i ed to the wel	dentify tl	ne ownership th	creof (both as	
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 Commis- sion. CERTIFICATION I hereby certify that the information con- tained herein is true and complete to the best of my knowledge and belief. B. W. Cozart Position B. W. Cozart Position District Operations Supt. Company Hamon Operating Company Date S-28-86 I hereby certify that the well location i here of actual surveys mode by me or under my supervision, and that the some is one of actual surveys mode by me or under my supervision, and that the some is use of detects to the best of my knowledge and belief. Date Surveyse 9-8-54 Position Date Surveyse 9-8-54 Continued Thereistoned Engineer and/or Lond Durveyse John W. West Continuer the surveys Date Surveyse	Ycs If answer is	5 "n	No If an o,' list the o	swcr is	"yes," type o	f consol	idation				
6600 0 I hereby certify that the information can tained herein is true and complete to the best of my knowledge and belief. Notice B. W. Cozart Position District Operations Supt. Company Hamon Operating Company Date 5-28-86 I hereby certify that the well location shown on this plat was plotted from field notes of accessional trained between the best of my knowledge and belief. I hereby certify that the well location shown on this plat was plotted from field notes of accessional trained between the best of my knowledge and belief. Date 5-28-86 I hereby certify that the well location shown on this plat was plotted from field notes of accessional trained between the best of my knowledge and belief. Date Surveyed 9-8-54 Registered Protessional Engineer and/or Local Curveyer John W. West Certificate No. Contracted No. Contrest No. <td>No allowabl</td> <td>le wi</td> <td>ll be assigne</td> <td>d to the</td> <td>well until all</td> <td>interest</td> <td>te have heer</td> <td></td> <td></td> <td></td> <td><u></u></td>	No allowabl	le wi	ll be assigne	d to the	well until all	interest	te have heer				<u></u>
660000 I hereby certify that the information complete to the best of my knowledge and betief. Nome B. W. Cozart Position District Operations Supt. Company Hamon Operating Company Date 5-28-86 I hereby certify that the well location 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 9-8-54 Registered Protostanel Engineer m.Vor Land Surveyet 9-8-54	A 00		 				1		71	CERTIFICATION	
Position District Operations Supt. Company Hamon Operating Company Date 5-28-86 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 9-8-54 Registered Professional Engineer and/or Land Euryoper John W. West Certificate No. 30 600 50 150 150 150 150 150 150 150 150 15	V			·					tained here best of my l Name	in is true and comp knowledge and bell	plete to the
shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the some is true and correct to the best of my knowledge and belief. Date Surveyed 9-8-54 Registered Professional Engineer and/or Lond Surveyor John W. West Certificate No. 676		 					 		Position District Company Hamon Ope Date	Operations	
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Form C-102 Supersedes C-128 Effective 1-1-65

