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OPERATOR	

5A. Indicate Type of Lease
STATE ☐ FEE ☒

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/>				7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>				8. Farm or Lease Name Lawrence "A"	
2. Name of Operator Hamon Operating Company Phone: 915/699-4987				9. Well No. 1	
3. Address of Operator 3525 Andrews Highway, Suite 105-A, Midland, Texas 79703-5048				10. Field and Pool, or Wildcat S.E. Knowles Wolfcamp	
4. Location of Well UNIT LETTER <u>D</u> LOCATED <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>19</u> TWP. <u>17-S</u> RCE. <u>39-E</u> NMPM				12. County Lea	
19. Proposed Depth 10,200'				19A. Formation Wolfcamp	
20. Rotary or C.T. P.U.				21. Elevations (show whether DF, KI, etc.) 3670' GR - 3686' KB	
21A. Kind & Status Plug. Bond Blanket in Force				21B. Drilling Contractor Pulling Unit	
22. Approx. Date Work will start May 28, 1986					

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#	293.95'	350	Surface
12-1/4"	9-5/8"	36 & 40#	4953.82'	2600	Surface
8-3/4"	5-1/2"	17 & 20#	12,130.63'	500	9720'

All casing was set when originally completed 1956.

1. Set squeeze retainer @ 10,250', squeeze below retainer with 225 sacks cement to put 25 sacks into Devonian, leave 5-1/2" casing filled with cement from TD to retainer at 10,250' and leave 50' cement above retainer.
2. Run Compensated Neutron log.
3. Perforate Wolfcamp at intervals from 9750' to 10,050'.
4. Acidize and/or hydraulically fracture as needed.

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.

Signed B.W. Cozart (B.W. Cozart) Title District Operations Supt. Date 5-23-86

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT SUPERVISOR TITLE DATE MAY 27 1986

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

**NEW 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.

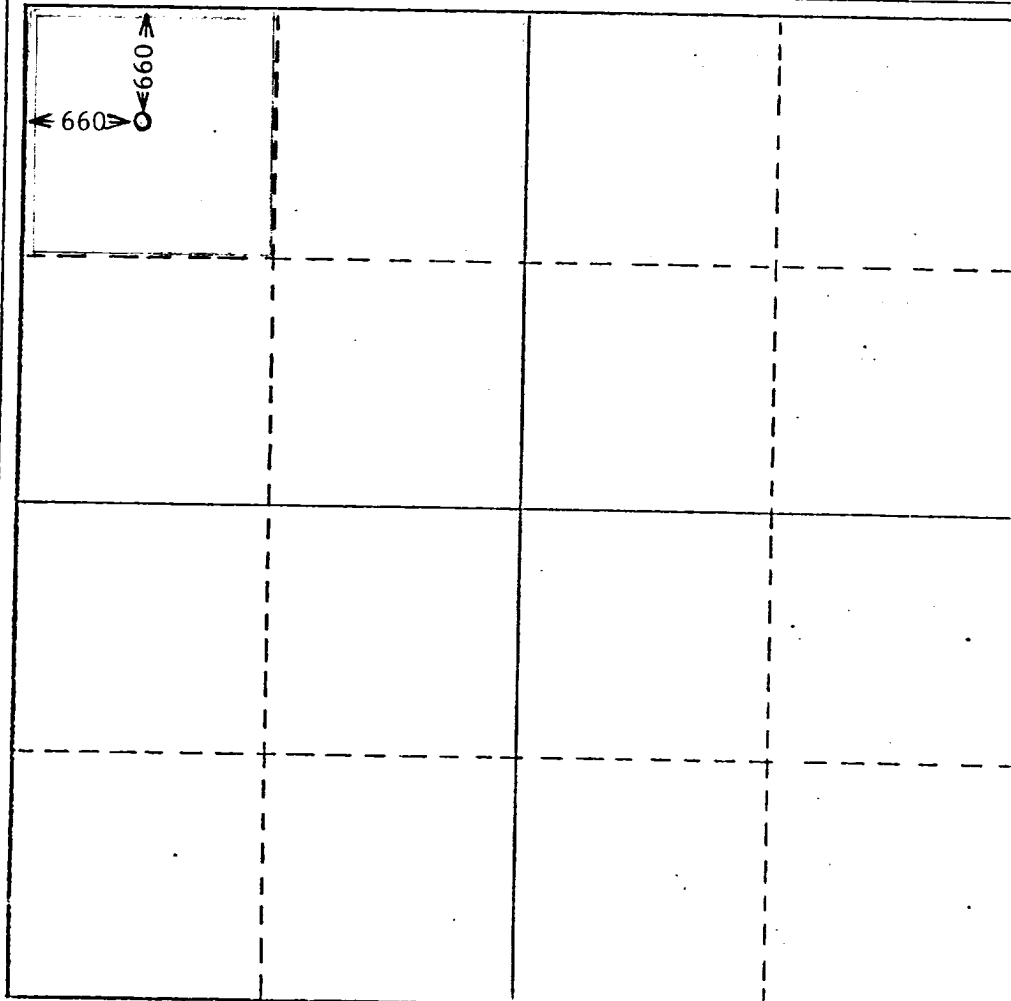
Operator Hamon Operating Company			Lease W.V. Lawrence "A"		Well No. 1
Unit Letter D	Section 19	Township 17-S	Range 39-E	County Lea	
Actual Footage Location of Well:					
660		feet from the	North	line and	660
				feet from the	West
Ground Level Elev. 3670	Producing Formation Wolfcamp		Pool S.E. Knowles Wolfcamp	Dedicated Acreage: 40 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 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.



CERTIFICATION

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

B. W. Cozart

Name
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 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 Surveyor

John W. West

Certificate No.

676

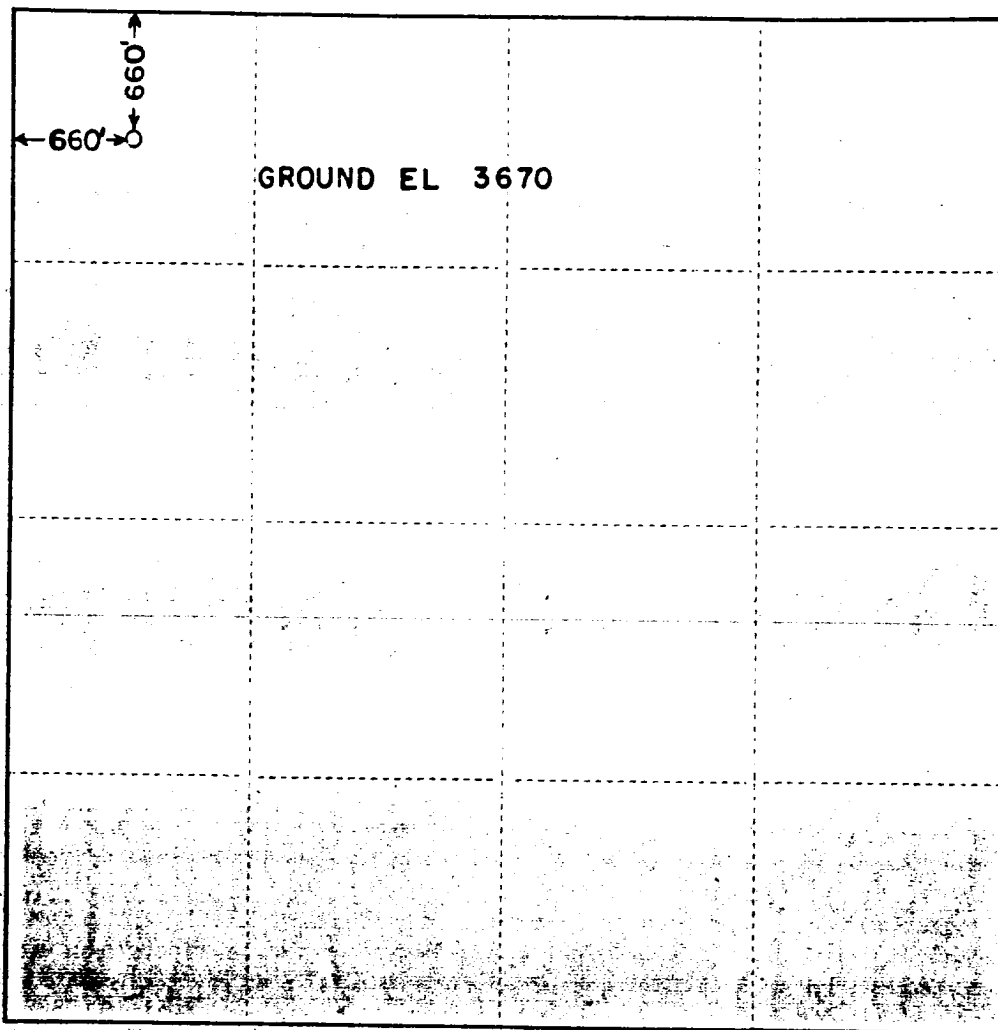
WELL LOCATION SURVEY PLAT

HOODS OFFICE 000

OPERATOR JAKE L. HAMON & WARREN PET. CORP

LEASE W. V. LAWRENCE "A" 125 NOV 1 PM 12:53

WELL NO. 1



SEC. 19, TWP. 17 S., RGE. 39 E., N.M.P.M.

I HEREBY CERTIFY THAT THIS PLAT WAS MADE
FROM NOTES TAKEN IN THE FIELD BY ME AND
THAT THE SAME IS TRUE AND CORRECT TO THE
BEST OF MY KNOWLEDGE AND BELIEF.

John W. West

JOHN W. WEST, PE & LS NO. 676

DATE 9-8-54