

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)

30-225-26773

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-2317

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

Hale State

2. Name of Operator

Barbara Fasken

8. Well No.

1-Y

3. Address of Operator

303 W. Wall, Suite 1900, Midland, TX 79701-5116

9. Pool name or Wildcat

Midway (Devonian) Strawn

4. Well Location

Unit Letter J : 2260 Feet From The South Line and 1650 Feet From The East Line

Section 8

Township

17-S

Range

37-E

NMPM

Lea

County

10. Proposed Depth

10930

11. Formation

Strawn

12. Rotary or C.T.

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

3796 RT

14. Kind & Status Plug. Bond

Statewide

15. Drilling Contractor

16. Approx. Date Work will start

6-7-93

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#	438'	350	Surface
12-1/4"	8-5/8"	32#	4450'	1700	Surface
7-7/8"	5-1/2"	17 & 20#	11875'	1700	4000'

Propose to plug back well from Midway Devonian perfs @ 11800'-11850' by setting a CIBP @ 10950' and capping with 2 sx cement.

Recomplete well to Midway Strawn with proposed perforations at 10705'-10771'.

Acidize with 15% NEFE acid as necessary to clean up perforations.

Present Devonian completion produces 11 bopd + 430 bwpd. Proposed Strawn completion should produce 150+ bopd + 0 bwpd.

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

TITLE Drilling & Operations Supt. DATE 6-7-93

TYPE OR PRINT NAME

Jimmy Davis, Jr.

TELEPHONE NO. 915-687-1777

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEKEL
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

JUN 22 1993

CONDITIONS OF APPROVAL, IF ANY:

**N MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102
Supersedes C
Effective 1-1-

All distances must be from the outer boundaries of the Section.

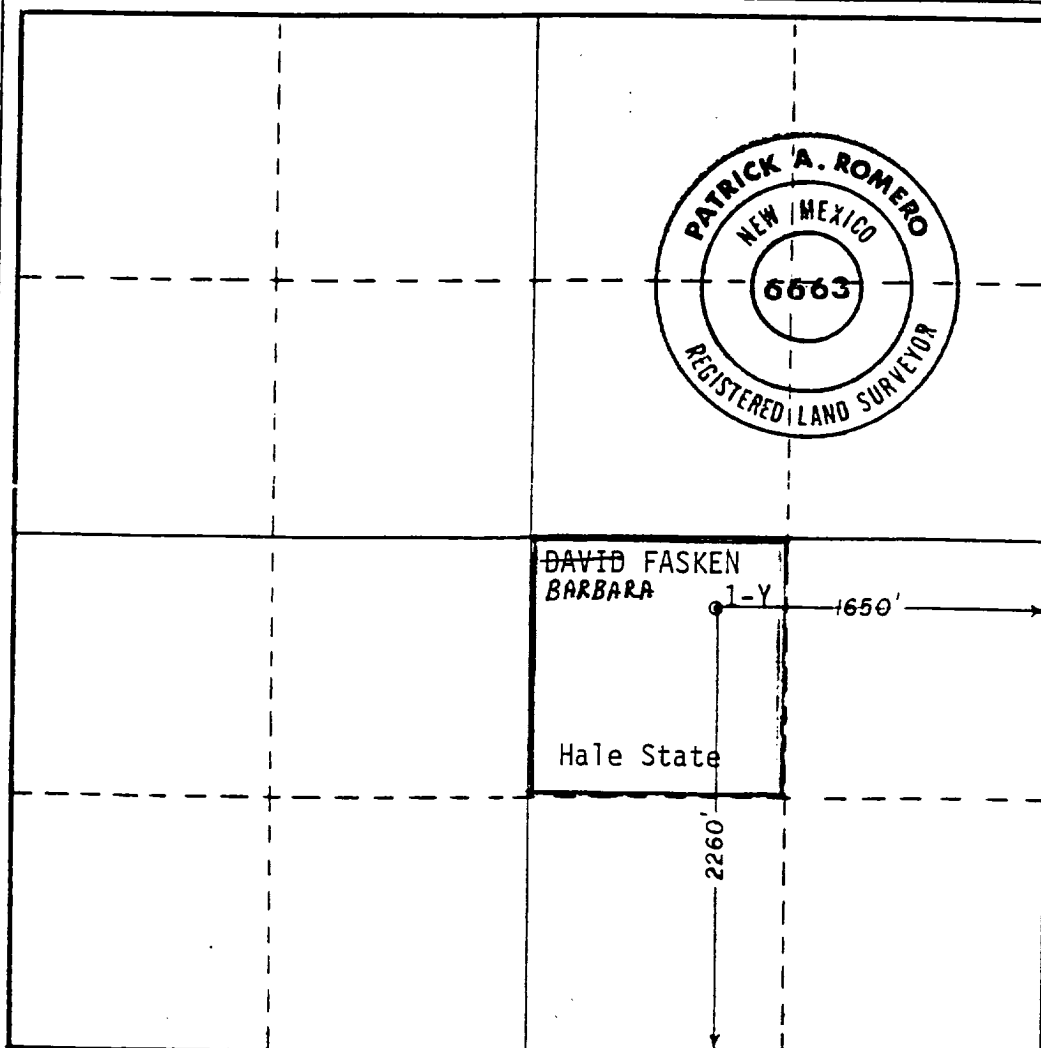
Operator <u>Barbara David Fasken</u>				Lease <u>Hale State</u>		Well No. <u>1Y</u>
Unit Letter <u>J</u>	Section <u>8</u>	Township <u>17 South</u>	Range <u>37 East</u>	County <u>Lea</u>		
Actual Footage Location of Well: <div style="display: flex; justify-content: space-between; align-items: center;"> 2260 feet from the South line and 1650 feet from the East line </div>						
Ground Level Elev. <u>3781.0</u>	Producing Formation <u>Devonian Strawn</u>		Pool <u>Midway</u>		Dedicated Acreage: <u>40</u> 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.

James F. Groce
James F. Groce
 Manager - Engr'g/Oper
Barbara Fasken
6/14/93

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

April 24, 1980

Registered Professional Engineer
and/or Land Surveyor

Patrick A. Romero

Certificate No. **JOHN W. WEST 678**
PATRICK A. ROMERO 6663