Submit to Appropriate
District Office
State Lease – 6 copies
Fee Lease – 5 copies

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

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

API NO. (assigned by OCD on New Wells) 30-025-30610

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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
Mary Ann 12C

2. Name of Operator
Nearburg Producing Company

8. Well No.
1

3. Address of Operator
P. O. Box 31405, Dallas, Texas 75231-0405

9. Pool name or Wildcat
Shipp ~~Humble City~~ Strawn, ~~South~~

4. Well Location
Unit Letter C : 990 Feet From The north Line and 1,500 Feet From The west Line

Section 12 Township 17S Range 37E NMPM Lea County

10. Proposed Depth	11. Formation	12. Rotary or C.T.
12,400'	Strawn	Rotary

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
3,735.8' GR	Blanket	Undetermined	May 15, 1989

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#	460'	500	Circ.
11"	8-5/8"	23#,24# or 32#	4,700'	1,600	Tie back to surf. csg.
7-7/8"	4-1/2" or 5-1/2"	11.6# or 17# & 20#	12,200'	830	±8,000'

Propose to drill the well to evaluate the Strawn formation. After reaching TD, logs will be run and casing set if the evaluation is positive. Perforate, test and stimulate as necessary to establish production. BOP program is attached.

Nonstandard location hearing, Case #9668, is scheduled for May 10, 1989.

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 T. R. MacDonald TITLE Engineering Manager DATE 5-9-89

TYPE OR PRINT NAME T. R. MacDonald TELEPHONE NO. 214/739-1778

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE MAY 18 1989

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval Date Unless Drilling Underway.