Submit to Appropriate State of New Mexico District Office Energy, Minerals and Natural Resources Department State Lease - 6 copies Fee Lease - 5 copies OIL CONSERVATION DIVISION						– Form C-101 Revised 1-1-89		
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, Ni	M 88240	38	API NO. (assigned by OCD on New Wells) 30-025-30853					
DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088					5. Indicate Type of Lease STATE X FEE			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410					6. State Oil & Gas Lease No. E-8184			
APPLICA	TION FOR PERMIT	TO DRILL, DEEPEN, O	OR PLUG BACK	1//////////////////////////////////////	////////			
1a. Type of Work:		······································		7. Lease Name or Unit Agreement Name				
DRILL X RE-ENTER DEEPEN PLUG BACK   b. Type of Well: OIL OIL OIL MULTPLE   WELL OTHER ZONE X ZONE				East Pearl Queen Unit				
2. Name of Operator				8. Well No.				
Sirgo Operating, Inc.					84			
3. Address of Operator				9. Pool name or Wildcat				
P.O. Box 353	l, Midland, Tex	as 79702		Pearl Queen				
4. Well Location Unit Letter	<u>1</u> : <u>265</u> Feet	From The South	Line and 10	Feet	From The	West Line		
Section 27	7 Town	ship 19S Rar	35E	NMPM L	ea	<u> </u>		
		1111111111	ווווווווווווווווווווווווווווווווווווווו		mm	County		
		ormation 12. Rotary or C.T.						
		5000'		Queen		Rotary		
13. Elevations (Show whether DF, RT, GR, etc.) 14. Kind & Status Plug. Bond 15. Drilling Contractor					16. Approx. I	Date Work will start		
3713' GR Cash Statewide Peterson					April	1990		
	PF	ROPOSED CASING AN	ID CEMENT PROGI	RAM				
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF	CEMENT	EST, TOP		
12-1/4"	8-5/8"	24#	400'	250 s		Surface		
7-7/8"	-7/8" 5-1/2" 15.50# & 17# 5000'		1000 sx.		Surface			

The Queen zone will be selectively perforated and stimulated as needed for optimum production.

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 SKONATURE	above is true and complete to the best of my know!		e Production Technician		12.90
TYPE OR PRINT NAME BO	nnie Atwater	nitz -			915/685-0878
(This space for State Use)	Orig. Signed av Paul Kautz Geologist			MAY -	4 1990
APPROVED BY				DATE	
CONDITIONS OF APPROVAL, IF ANY	:		Pornut Excision (* *)	Insthe Eres	

Raine not

Pormit Expires C Months From Approx Date Unless Driting Underway.



## MEXICO OIL CONSERVATION COMMIS

Form C-102 Supersedes C+128 Effective 1-1-65

All distances must be from the outer boundaries of the Section

Operator		All distances must be fr	Lease	- or the occurate	3472.51 ***	
	OPERATING,	ENC.	EAST PEAR	L QUEEN SAN	D Well tic.	
Unit Letter	Section	Township	Range	County	04	
M	27	19 South	35 East	]	Lea County, N.M.	
Actual Footage Loc 265		South life and	10			
Ground Level Elev.	leet from the Producing F		 Paol	leet from the	Vest <u>nue</u> Celonter Arrenter	
3713.	QUEEN		PEARL QUEEN		4.0	174-51
1. Outline th	e acreage dedic	ated to the subject we	ll by colored penci	il or hachure ma	· · · · · · · · · · · · · · · · · · ·	
	0	5			and on the plat before.	
2. If more th	ian one lease is	s dedicated to the well,	outline each and	identify the own	nership thereof (both as to worki	ing
interest ar	nd royalty).					
3. If more tha	an one lease of	different ownership is d	edicated to the we	ll, have the inte	erests of all owners been conso	.1:
dated by c	ommunitization,	unitization, force-poolin	g. etc?		orests of an owners been conso	)11-
V.		· 44 - 71 - 6		Umitin ation	D 0507	
X Yes	L No If a	answer is "yes," type of	consolidation	Unitization	, R-2537	
If answer	is "no," list the	owners and tract descr	iptions which have	actually been	consolidated. (Use reverse side	of
this form if	i necessary.)					
No allowab	ole will be assign	ned to the well until all	interests have bee	n consolidated	(by communitization, unitizatio	on,
sion.	ling, or otherwise	e) or until a non-standard	unit, eliminating s	such interests,	has been approved by the Commi	is-
····						
	l a		1		CERTIFICATION	
			1		I hereby certify that the information co	
	I		l i		tained herein is true and complete to t best of my knowledge and belief.	he
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					Bonnie Atwater	
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