

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) 30-025-30907
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work: DRILL <input checked="" type="checkbox"/> RE-ENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>					
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"/>					
2. Name of Operator OSBORN HEIRS COMPNAY					
3. Address of Operator P.O. BOX 17968, SAN ANTONIO, TEXAS 78286					
4. Well Location Unit Letter <u>B</u> : <u>330</u> Feet From The <u>NORTH</u> Line and <u>2080'</u> Feet From The <u>EAST</u> Line Section <u>20</u> Township <u>17S</u> Range <u>37E</u> NMPM <u>LEA</u> County					
10. Proposed Depth 5500'		11. Formation SAN ANDRES		12. Rotary or C.T. ROTARY	
13. Elevations (Show whether DF, RT, GR, etc.) 3769.1		14. Kind & Status Plug. Bond BLANKET #4554666		15. Drilling Contractor TO BE DETERMINED	
16. Approx. Date Work will start JULY 1, 1990					
17. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/2"	8 5/8"	24#	400'	250	SURFACE
7 7/8"	5 1/2"	15.5#	5500'	330	3200'

PROPOSE TO DRILL 12 1/2" HOLE TO 400'; RUN 8 5/8" CASING, AND CEMENT WITH 250 SACKS CEMENT.

DRILL 7 7/8" HOLE TO 5500', RUN OPEN HOLE LOGS. IF COMMERCIAL POTENTIAL SHOWS, RUN 5 1/2" CASING, AND CEMENT WITH 330 SACKS CEMENT.

BLOWOUT PREVENTER- 900 DERIES 3000# SHAFFER TYPE F

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 [Signature] TITLE AGENT DATE 5-14-90
TYPE OR PRINT NAME TELEPHONE NO. 393-3117

(This space for State Use)

Drig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE JUN 01 1990

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

RECEIVED

MAY 14 1990

OCD
HOSBS OFFICE

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator OSBORN HEIRS CO.			Lease E. D. SHIPP		Well No. 4
Unit Letter B	Section 20	Township 17 South	Range 37 East	County Lea	
Actual Footage Location of Well: 330 feet from the North line and 2080 feet from the East line					
Ground level Elev. 3769.1	Producing Formation San Andres		Pool Midway San Andres	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 interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?

☐ Yes

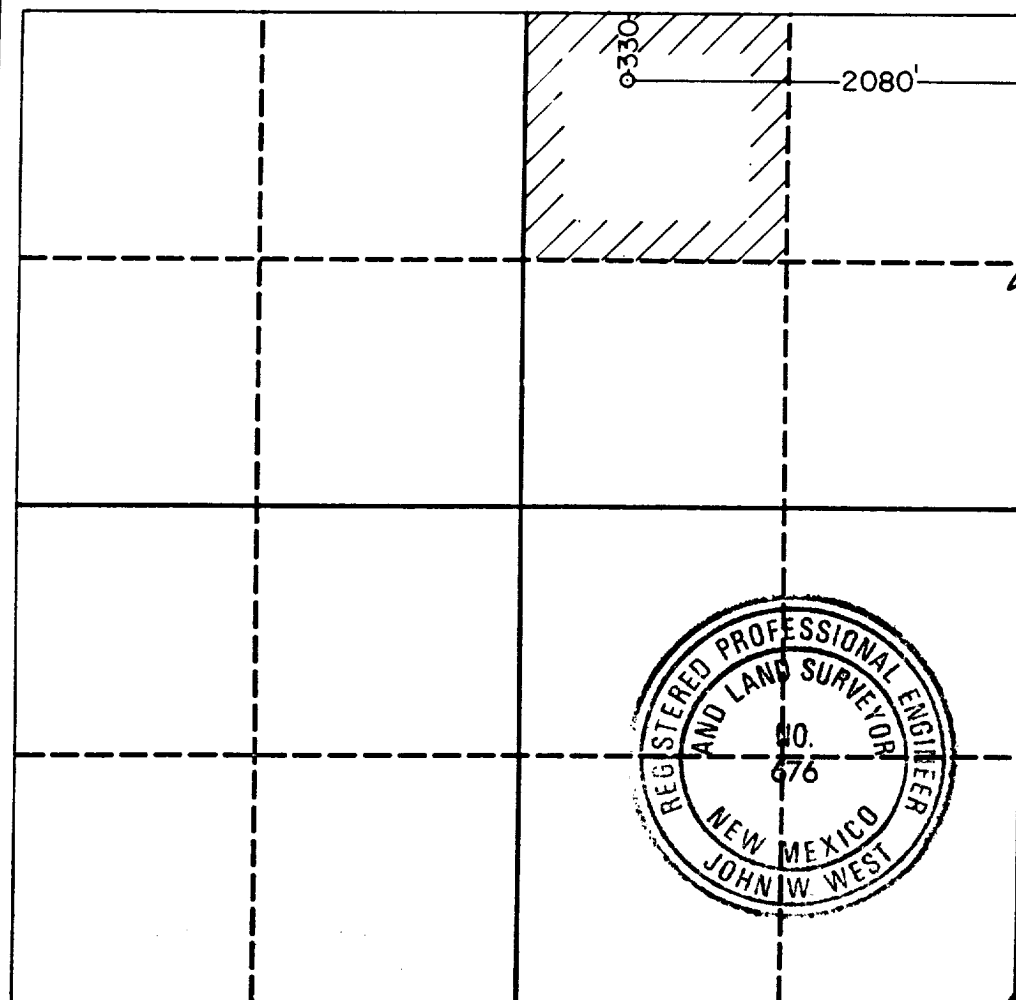
☐ No

If answer is "yes" type of consolidation

Force Pooling Case 9546 - R. 9189

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 interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature

Printed Name

John W. West

Position

Agent

Company

Osborn Heirs Company

Date

May 14, 1990

SURVEYOR CERTIFICATION

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

May 14, 1990

Signature & Seal of
Professional Surveyor

Certificate No.

JOHN W. WEST,

676

RONALD J. EIDSON,

3239