

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

DISTRICT I
P.O. Box 1900, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

API NO. (assigned by OCD on New Wells)
30-025-31396

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
V-2038

7. Lease Name or Unit Agreement Name

Comanche "AJU" State

8. Well No.
1

9. Pool name or Wildcat
Young Strawn

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 ☐

2. Name of Operator

Yates Petroleum Corporation

3. Address of Operator

105 South Fourth Street, Artesia, New Mexico 88210

4. Well Location

Unit Letter K : 2310 Feet From The South Line and 2260 Feet From The West Line
Section 16 Township 18 South Range 32 East NMPM Lea County

10. Proposed Depth
12,000'

11. Formation
Strawn

12. Rotary or C.T.
Rotary

13. Elevations (Show whether DF, RT, GR, etc.)
3587' GR

14. Kind & Status Plug. Bond
Blanket

15. Drilling Contractor
Undesignated

16. Approx. Date Work will start
ASAP

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 1/8"	54.5#	350'	350 sacks	Circulated
12 1/4"	8 5/8"	32#	2900'	1100 sacks	Circulated
7 7/8"	5 1/2"	17#	TD	300 sacks	As warranted

Yates Petroleum Corporation proposes to drill and test the Strawn and Intermediate formations. Approximately 350' of surface casing will be set with cement circulated to shut off gravel and cavings. Intermediate casing will be set to approximately 2900' with cement circulated. If productive, 5 1/2" casing will be run and cemented with adequate cover.

MUD PROGRAM: FW & Native mud to 350'; Brine to 2900'; cut Brine to 10,000'; S. Gel/Starch

BOPE PROGRAM: BOPE to be installed on intermediate casing and tested daily for operational.

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 Clifton R. May TITLE Permit Agent DATE 9-24-91

TYPE OR PRINT NAME Clifton R. May TELEPHONE NO. 748-1471

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE SEP 26 1991

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

BOP STACK

