

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)

30-025-32298

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

B-1415-2

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

SHELL WESTERN E&P INC.

3. Address of Operator

P. O. BOX 576, HOUSTON, TX 77001 (WCK 5237)

7. Lease Name or Unit Agreement Name

STATE "D"

8. Well No.

3

9. Pool name or Wildcat

OWAY VACUUM DRINKARD

4. Well Location

Unit Letter M : 330 Feet From The SOUTH Line and 695 Feet From The WEST Line

Section 31 Township 17S Range 35E NMPM LEA County

10. Proposed Depth

8100'

11. Formation

DRINKARD

12. Rotary or C.T.

ROTARY

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

3985.6' GR

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

NORTON DRILLING CO.

16. Approx. Date Work will start

12/01/93

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
24"	20"	CONDR	40'	60	SURF
17-1/2"	13-3/8"	40#	1500'	800	SURF
12-1/4"	8-5/8"	24 & 32#	3000'	500	SURF
7-7/8"	5-1/2"	15.5#	8100'	1100	SURF

BOP PROGRAM: 2000# RAM PREVENTER

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 J. Marcus Windley TITLE TECH. MANAGER - ASSET ADMIN DATE 11/05/93

TYPE OR PRINT NAME A. J. DURRANI (713) 544-3797 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE NOV 10 1993

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

RECEIVED

NOV 13 1993
UCC HOBBS
OFFICE

OIL CONSERVATION DIVISION

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

DISTRICT I
P.O. Box 1080, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 86210

DISTRICT III
1000 Rio Brasos Rd., Antuo, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator SHELL WESTERN E. & P., INC.		Lease STATE "D"		Well No. 3
Unit Letter M	Section 31	Township 17 SOUTH	Range 35 EAST NMPM	County LEA
Actual Footage Location of Well:				
330 feet from the SOUTH line and		695 feet from the WEST line		
Ground Level Elev. 3985.6'	Producing Formation DRINKARD	Pool ✓ VACUUM DRINKARD <i>Drain</i> VACUUM	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

If answer is "no" list of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary.)

No allowable will be assigned to the well unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.

695'

130'

OPERATOR CERTIFICATION

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

Signature

Printed Name

A. J. DURRANI

Position

TECH. MGR. - ASSET ADMIN.

Company
SHELL WESTERN E&P INC.

Date _____

10/21/93

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 _____

OCTOBER 15, 1993

Signature & Seal of
Professional Surveyor



JOHN W. WARD 676

93-11-2049

4-1-12
12-1-12
12-1-12

RECEIVED

DATE