

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 1980, 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 28468
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	VA-928
7. Lease Name or Unit Agreement Name	STATE "NO"
8. Well No.	1
9. Pool name or Wildcat	WILDCAT BONESPRINGS

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

RAY WESTALL

3. Address of Operator

P.O. BOX 4, LOCO HILLS, NM 88255

4. Well Location

Unit Letter E : 1980 Feet From The NORTH Line and 660 Feet From The West EAST Line

Section 7 Township 19S Range 36E NMPM LEA County

10. Proposed Depth
8500

11. Formation

BONE SPRINGS

12. Rotary or C.T.
REVERSE

13. Elevations (Show whether DF, RT, GR, etc.)
3817' GR

14. Kind & Status Plug. Bond
BLANKET

15. Drilling Contractor
TR WELL SERVICE

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

THIS WELL WAS ORIGINALLY DRILLED BY AMOCO AS THEIR STATE NO #1
TOTAL DEPTH OF 11,253' 8 5/8" CSNG WAS SET @ 4117' AND CEMENT CIRCULATED
5 1/2" CSNG WAS RUN TO 11,250' AND CMT CIRCULATED TO SURFACE.
WE PROPOSE TO RE-ENTER AND PERF SELECTED ZONES FOR BONE SPRINGS 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 above is true and complete to the best of my knowledge and belief.

SIGNATURE James Garden TITLE PRODUCTION CLERK DATE 07/19/93

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless ~~Being~~ Underway.

Re-enter

JUL 21 1993