

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)
30-025-31318

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
V-2199

7. Lease Name or Unit Agreement Name
Gem, 8705 JV-P

8. Well No.
6

9. Pool name or Wildcat
Gem, East *Marrow*

Amended

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
BTA Oil Producers

3. Address of Operator
104 S. Pecos, Midland, TX 79701

4. Well Location
Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line
Section 2 Township 20S Range 33E NMPM Lea County

10. Proposed Depth
10,640 TD

11. Formation
Morrow

12. Rotary or C.T.
Rotary

13. Elevations (Show whether DF, RT, GR, etc.)
3579' GR 3593' RT

14. Kind & Status Plug. Bond
Blanket

15. Drilling Contractor
Peterson Drlg Co

16. Approx. Date Work will start
9-6-91

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
26"	20"	106.5 & 94	1385	2200	Surface
17-1/2	13-3/8	68	3116	2200	Surface
11	8-5/8	32	5490	1700	4090
7-7/8	5-1/2	20	13640	2600	Surface

Filed to Amend 9, 10, & 11

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 *Dorothy Houghton* TITLE Regulatory Administrator DATE 10-31-91

TYPE OR PRINT NAME Dorothy Houghton

TELEPHONE NO. 915-682-3753

(This space for State Use)

ORIGINAL SIGNED BY ERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

1001

RECEIVED

NOV 05 1991

115
F. C. S. C. R. C. S.

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

OIL CONSERVATION DIVISION

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

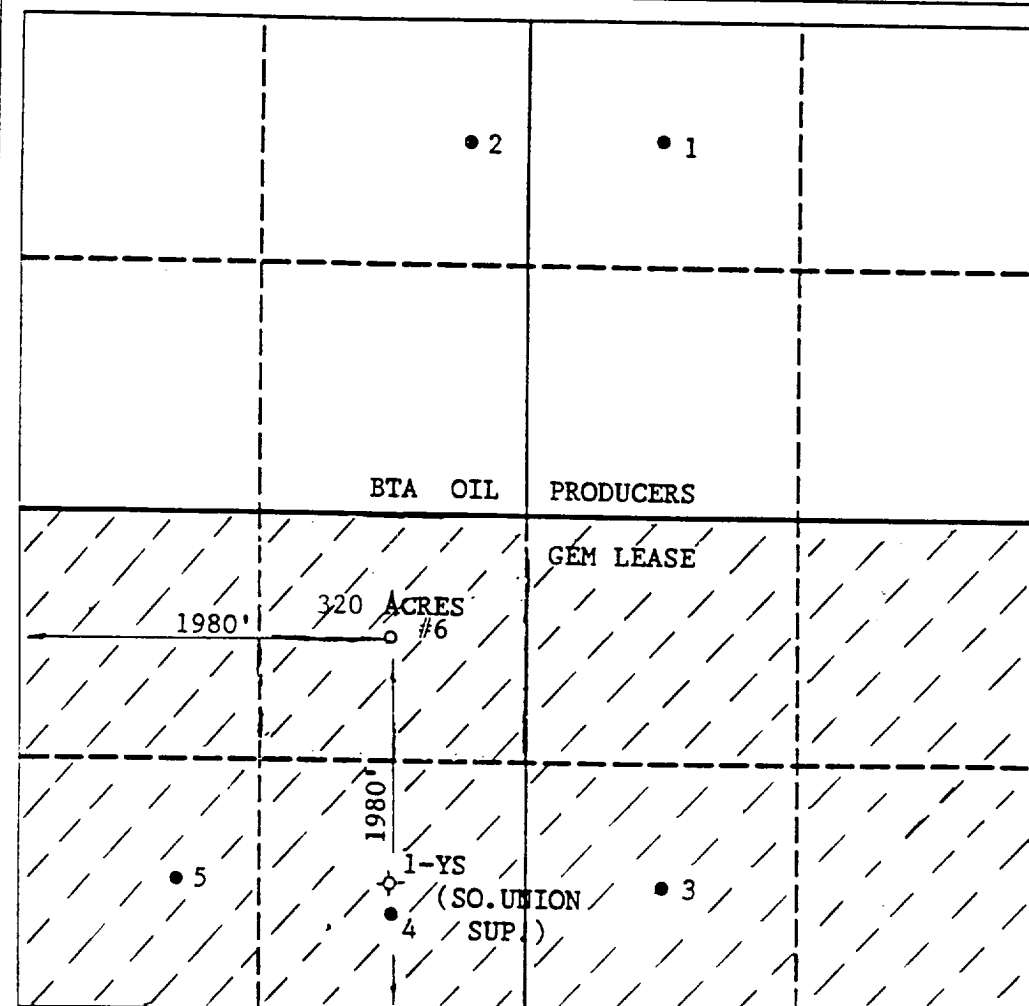
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator BTA OIL PRODUCERS			Lease 8705 JV-P GEM		Well No. 6
Unit Letter "K"	Section 2	Township 20-S	Range 33-E	County NMPM	LEA
Actual Footage Location of Well: 1980 feet from the SOUTH line and 1980 feet from the WEST line					
Ground level Elev. 3579'	Producing Formation Morrow		Pool Gem, East	Dedicated Acreage: 320 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- 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 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 is true and complete to the best of my knowledge and belief.

Signature
Dorothy Houghton
Printed Name
Dorothy Houghton
Position
Regulatory Administrator
Company
BTA Oil Producers
Date
9-6-91

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes, 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
JULY 26, 1991
Signature & Seal of Professional Surveyor
Max A. Schumann, Jr.
MAX A. SCHUMANN, JR.
Certificate No.
1510

RECEIVED

NOV 05 1991

**069
HOBBS OFFICE**