

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)

30-025-31592

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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 ☐

7. Lease Name or Unit Agreement Name

Taylor

2. Name of Operator

ARCO OIL AND GAS COMPANY

8. Well No.

1

3. Address of Operator

Box 1610, Midland, Texas 79702

9. Pool name or Wildcat

Wildcat - San Andres

4. Well Location

Unit Letter

F

: 1980

Feet From The

North

Line and

1980

Feet From The

West

Line

Section 1

Township 19S

Range

38E

NMPM

Lea

County

10. Proposed Depth

4500

11. Formation

San Andres

12. Rotary or C.T.

Rotary

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

3601 GR

14. Kind & Status Plug Bond

Statewide Blanket

15. Drilling Contractor

Grace Drilg.Co

16. Approx. Date Work will start

5-11-92

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4	8-5/8	24	500	260	Surf
7-7/8	5-1/2	15.5	4500	450	1500

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 Ken W. Gosnell TITLE Engr. Tech. DATE 5-4-92

TYPE OR PRINT NAME Ken W. Gosnell 915/688-5672 TELEPHONE NO.

(This space for State Use)

Orig. Signed by,
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

OIL CONSERVATION DIVISION

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Santa Fe, New Mexico 87504-2088

DISTRICT
P.O. Box 1980, Hobbs, NM 88240

DISTRIBUTION
2 (1) Drawer DD, Artesia, NM 88210

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator		Lease		Well No.	
ARCO OIL AND GAS COMPANY		Taylor		1	
Unit Letter	Section	Township	Range	County	
F	1	19 S	38 E	NMPM Lea	
Actual Footage Location of Well:					
1980	feet from the	North	line and	1980	feet from the West line
Ground level Elev.		Producing Formation		Pool	
3601'		San Andres		Wildcat	
				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.?

If answer is "yes" 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 web 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.

A 4x4 grid map of a coastal area. A dashed line runs horizontally across the middle of the grid. The label '1980' is written vertically in the second column, second row. The label '1' is written above a small circle in the second column, third row. The label '1980' is also written horizontally in the first column, third row. The top of the grid is labeled 'R 38 E' and the top right corner is labeled '1'.

OPERATOR CERTIFICATION

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

Signature

Ken W Gosnell

Printed Name _____

Ken W. Gosnell

Position

Regulatory Coordinator

COUNTRY

ARCO Oil & Gas Company

Date _____

5-4-92

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.

April 1, 1992

Date Surveyed _____

Signature & Seal of
Professional Surveyor

Certificate No.

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