

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)

30-025-31688

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

E-1587

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

Pearl 29

2. Name of Operator

Matador Operating Co.

8. Well No.

1A

3. Address of Operator

415 W. Wall St., Ste 1101, Midland, TX 79701

9. Pool name or Wildcat

Pearl San Andres, West

4. Well Location

Unit Letter N : 330 Feet From The South Line and 1650 Feet From The West Line

Section 29

Township 19S

Range 3E 35E

NMPM

Lea

County

10. Proposed Depth

6000

11. Formation

San Andres

12. Rotary or C.T.

Rotary

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

3735 GR

14. Kind & Status Plug. Bond

Blanket Current

15. Drilling Contractor

Unknown

16. Approx. Date Work will start

9-21-92

17. PROPOSED CASING AND CEMENT PROGRAM

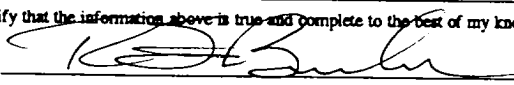
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4	8 5/8	24#	425	300	Surface
7 7/8	5 1/2	15.5#	6000	1500	Surface

Drill 6000' San Andres test w/ double ram, 3000 psi
BOP stack during 7 7/8" hole interval.

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



TITLE Operations Manager

DATE 8-17-92

TYPE OR PRINT NAME

R. F. Burke

915-687-5955
TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

AUG 19 '92

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

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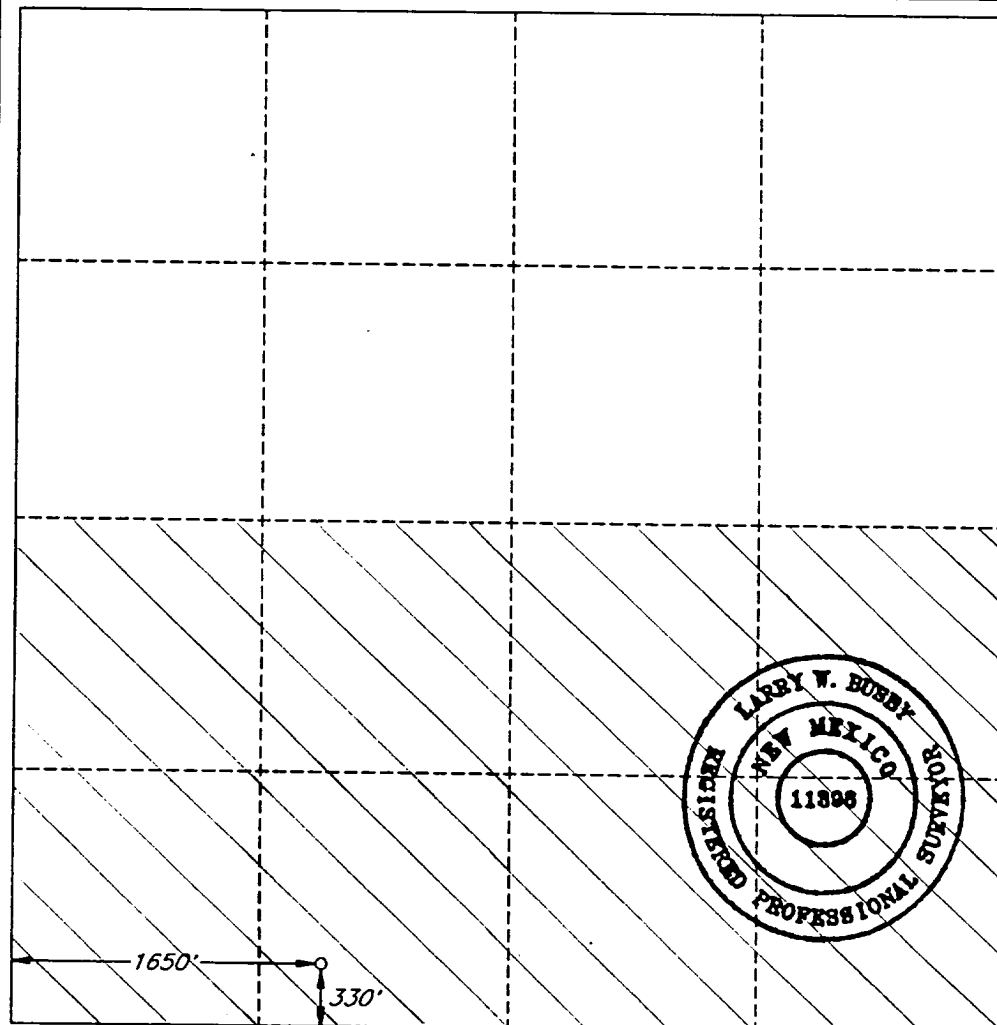
P. O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL LOCATION AND ACREAGE DEDICATION PLAT

All distances must be from the outer boundaries of the section.

Operator MATADOR OPERATING COMPANY		Lease PEARL "29"		Well No. 28-1 N
Unit Letter N	Section 29	Township 19 SOUTH	Range 35 EAST, N.M.P.M.	County LEA
Actual Footage Location of Well 330 feet from the SOUTH line and 1650 feet from the WEST line				
Ground Level Elev. 3735'	Producing Formation SAN ANDRES	Pool PEARL SAN ANDRES, WEST	330 ⁴⁰ Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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 the owners been consolidated by communitization, unitization, forced-pooling, etc.?
☐ Yes ☐ No If answer is "yes", type of consolidation _____
If the answer is "no", list the owners and tract descriptions which have actually been consolidated. (Use the 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 herein is true and complete to the best of my knowledge and belief.

Signature
R.F. Burke
Printed Name
R.F. BURKE
Position
OPERATIONS MGR.
Company
MATADOR OPERATING CO.
Date
8-17-92

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.

Date Surveyed
AUGUST 10, 1992
Signature and Seal of Professional Surveyor
Larry W. Busby
Certificate No.
LARRY W. BUSBY R.P.S. #11898