## State of New Mexico

Submit to Appropriate District Office State Lease -- 6 copies Fee Lease -- 5 copies

Energy, erals and Natural Resoures Department

> Form C 101 Revised 1-1-89

## OIL CONSERVATION DIVISION

P.O. Box 2088 DISTRICT I API NO. (assigned by OCD on New Wells) P.O. Box 1980, Hobbs, NM 88240 Santa Fe. New Mexico 87504-2088 30-025-31813 DISTRICT H 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 FEE X STATE DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK 1a. Type of Work: 7. Lease Name or Unit Agreement Name DRILL X RE-ENTER DEEPEN . PLUG BACK **EUMONT GAS COM NO. 1** 1b. Type of Well: MULTIPLE WELL [ SINGLE X OTHER \_\_\_ ZONE 2. Name of Operator 8. Well No. **EXXON CORPORATION** 5 ATTN: REGULATORY AFFAIRS P. O. BOX 1600 MIDLAND, TX 79702 3. Address of Operator 9. Pool name or Wildcat
EUMONT YATES
7 RVRS ON (PRO GAS) 4. Well Location Unit Letter P: 660 Feet From The SOUTH Line and 960 Feet From The \_\_\_\_\_ Section Township 20 S Range 37 E **NMPM** LEA County 10. Proposed Depth 11. Formation 12. Rotary or C.T. 4000' QUEEN ROTARY 13. Elevations Show whether DF.RT.GR.etc.) 14. Kind & Status Plug, Bond 15. Drilling Contractor 16. Approx. Date Work will start 3548' GR **BLANKET** UNKNOWN **ASAP** 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 24, 32 8 5/8 400 150 SURF. 7 7/8 4 1/2 10.5, 11.6 3650 450 SURF. MINIMUN BOP WILL BE 300 # WP.

UNORTHODOX LOCATION AND ADMINISTRATIVE APPROVAL HAS BEEN REQUESTED FROM M. STOGNER IN SANTA FE. ALSO, SIMULTANEOUS DEDECATION WITH WELLS # 1, 2, 3 AND 4.

OFFSET OPERATORS HAVE BEEN NOTTETED

OF THE STATE OF TH	<b>.</b>
C102 IS ATTACHED.	
IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AN PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.	
Thereby certify that the information above is true and complete to the best of my knowledge and constraints.	
SIGNATURE CELLY PLACE CONTROL OF THE SIGNATURE	TITLE Administrative Specialist DATE 11/11/92
TYPE OR PRINT NAME Alex M. Correa	6782 (915) 688-7532 TELEPHONE NO.
This space for State Use	
ORIGINAL SIGNED BY JERRY SEXTON  APPROVED BY	JAN - 8 1996
CONDITIONS OF APPROVAL, IF ANY:	DATE
NO SULLIONS OF AFFROYAL, IF ANTI	

DEC O WIDDLE GOLDEN