

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

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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)

30-025-25752 08819

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

B-1506

7. Lease Name or Unit Agreement Name

State 157 "B"

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

Black Resources, Inc.

8. Well No.

2

3. Address of Operator

1100 Mustang Trail, Granbury, TX 76049-5621

9. Pool name or Wildcat

Jalmat Gas T-Y-SR

4. Well Location

Unit Letter C : 1650 Feet From The North Line and 2310 Feet From The West Line

Section 7 Township 22 S Range 36 E NMPM Lea County

10. Proposed Depth

3665'

11. Formation

Jalmat

12. Rotary or C.T.

Rotary

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

3599GR

14. Kind & Status Plug. Bond

Single

15. Drilling Contractor

Tyler Well Serv.

16. Approx. Date Work will start

3/3/93

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
16"	13"	45	247	250	surface
12"	9 5/8"	45	1594	400	surface
8 3/4"	7"	24	3730	250	surface

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 William D. Black TITLE President DATE 3/3/93

TYPE OR PRINT NAME William D. Black (817) 579-1144 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE MAR 16 1993

CONDITIONS OF APPROVAL, IF ANY: