

District I
PO Box 1980, Hobbs, NM 88241 1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-101
Revised February 10, 1994

Instructions on back
Submit to Appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

☒ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

Operator Name and Address. Raptor Resources, Inc. 901 Rio Grande Austin, Tx. 78701		GRID No. 162791
Property Name State A A/C 2		API Number 30 - 025-08859
Property Code 24671	Well No. 52	

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
H	9	22S	36E		1980	North	660	East	Lea

s Proposed Bottom Hole Location If Different From Surface

UL or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Proposed Pool 1 Jalmat Tansill Yates 7 Rvrs (Pro Gas)					Proposed Pool 2				

Work Type Code P/E 16 Multiple	Well Type Code G 17 Proposed Depth 3650'	Cable/Rotary R 18 Formation Yates/7 Rvrs	Lease type Code S 19 Contractor	14 Ground Level Elevation 20 Spud Date
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21 Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC

Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

Raptor plans to re-enter this P&A'ed well and recomplete in the Jalmat Tansill Yates 7 Rvrs pool

There is a CIBP @ 3650'. The surface cement plug will be drilled out.
The well will be perfered from 3153' to 3560'.

Acidize
Frac
POP

Permit Expires 1 Year From Approval
Date Unless Drilling Underway

Re-Entry

23 I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

Bill R. Keathly

Title:

R regulatory Agent for Raptor

Date:

8-27-01

Phone

(915) 697-1609

OIL CONSERVATION DIVISION

Approved by:

ORIGINAL SIGNED

Title:

PAUL F. KAUTZ

Approval Date:

Expiration Date:

Conditions of Approval: APR 01 2002

Attached

J
C
A

District I
1625 N. French Dr., Hobbs, NM 88240

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brazos Rd. Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Revised February 21, 1994

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State Lease - 4 Copies

Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number 30-025-08859		2 Pool Code 79240		3 Pool Name Jalmat Tansill Yates 7 Rvrs (Pro Gas)	
4 Property Code 24671		5 Property Name State A A/C 2			
7 OGRID No. 162791		8 Operator Name Raptor Resources			
		6 Well Number 52			
		9 Elevation			

10 Surface Location

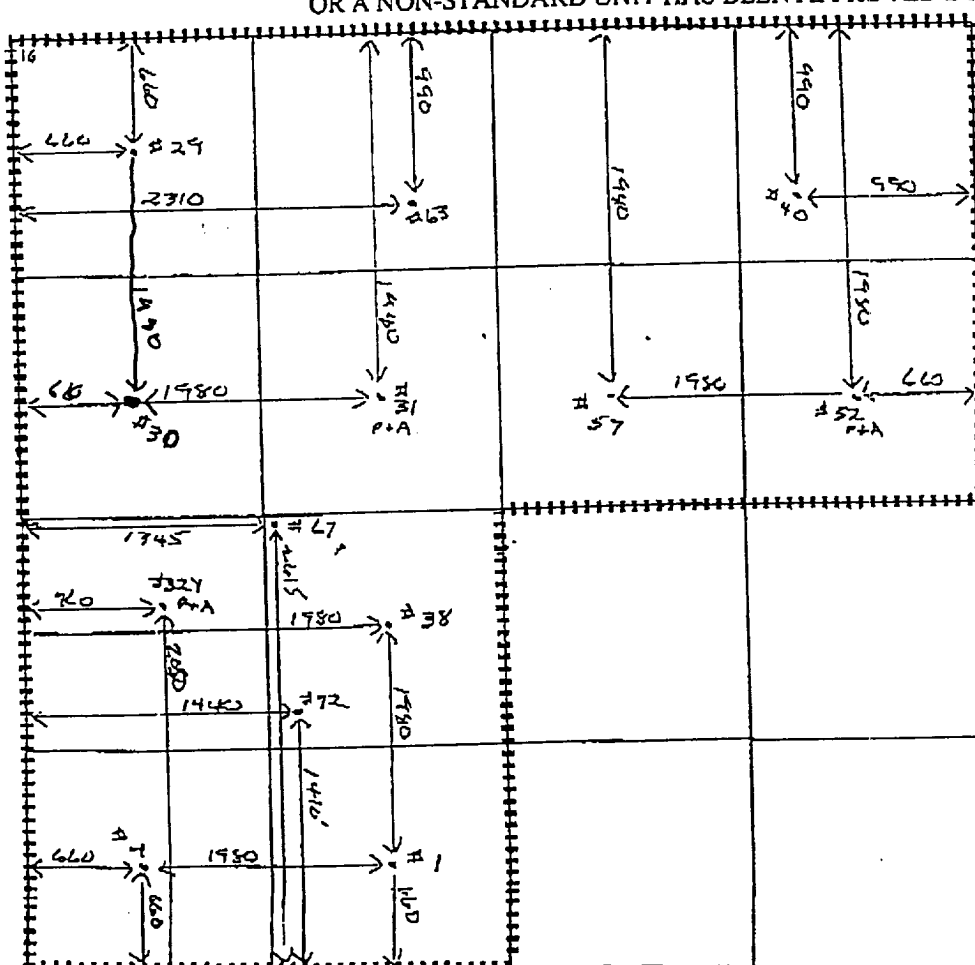
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
H	9	22S	36E		1980	North	660	East	Lea

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres 480	13 Joint or Infill	14 Consolidation Code	15 Order No. Case No. 12678, Order No. R-11642
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



17 OPERATOR CERTIFICATION

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

Bill R. Keathly
Signature

Bill R. Keathly
Printed Name

Regulatory Agent
Title

8-27-01
Date

18 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 belief.

Date of Survey

Signature and Seal of Professional Surveyor.

Certificate Number