

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)

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
B-244-1

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

Lewis B. Burleson, Inc.

3. Address of Operator

P.O. Box 2479. Midland, Texas 79702

7. Lease Name or Unit Agreement Name

H. T. Orcutt (NCT-H)

8. Well No.

2

9. Pool name or Wildcat

Skaags (Drinkard)

4. Well Location

Unit Letter C : 990 Feet From The North Line and 1800 Feet From The West Line

Section 11 Township 20-S Range 37-E NMPM Lea County

10. Proposed Depth

6950

11. Formation

Drinkard

12. Rotary or C.T.

Rotary

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

3608 GR

14. Kind & Status Plug. Bond

Statewide (old)

15. Drilling Contractor

16. Approx. Date Work will start

6/15/97

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#	1403	750	Surf.
7-7/8"	5-1/2"	14"	6752	900	2430

Install surface head, drill out plugs to old TD. Squeeze old perfs, test casing to 500 psi. Drill out shoe and deepen to the Drinkard. Stimulate and put well on production.

OPER. LOG NO. 13300

PROPERTY NO. 5887

POOL CODE 57000

EFF. DATE 4/18/97

API NO. 30-025-21867

Permit Expires 1 Year From Approval  
Date Unless Drilling Underway  
Re-Entry

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

Vice-President

DATE

4/10/97

Steven L. Burleson

915/683-4747

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY  
GARY WINK  
FIELD REP. I

APPROVED BY

TITLE

DATE

APR 18 1997

CONDITIONS OF APPROVAL, IF ANY:

Jo

Submit to Appropriate  
District Office  
State Lease - 4 copies  
Fee Lease - 3 copies

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised 1-1-89

**OIL CONSERVATION DIVISION**

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

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1000 Rio Brazos Rd., Aztec, NM 87410

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

All Distances must be from the outer boundaries of the section

Operator <b>Lewis B. Burleson, Inc.</b>			Lease <b>H. T. Orcutt (NCT-H)</b>		Well No. <b>2</b>
Unit Letter <b>C</b>	Section <b>11</b>	Township <b>20-S</b>	Range <b>37-E</b>	County <b>Lea</b>	
Actual Footage Location of Well: <b>990</b> feet from the <b>North</b> line and <b>1800</b> feet from the <b>West</b> line					
Ground level Elev. <b>3608</b>	Producing Formation <b>Drinkard</b>		Pool <b>Skaggs</b>	Dedicated Acreage: <b>40</b> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.

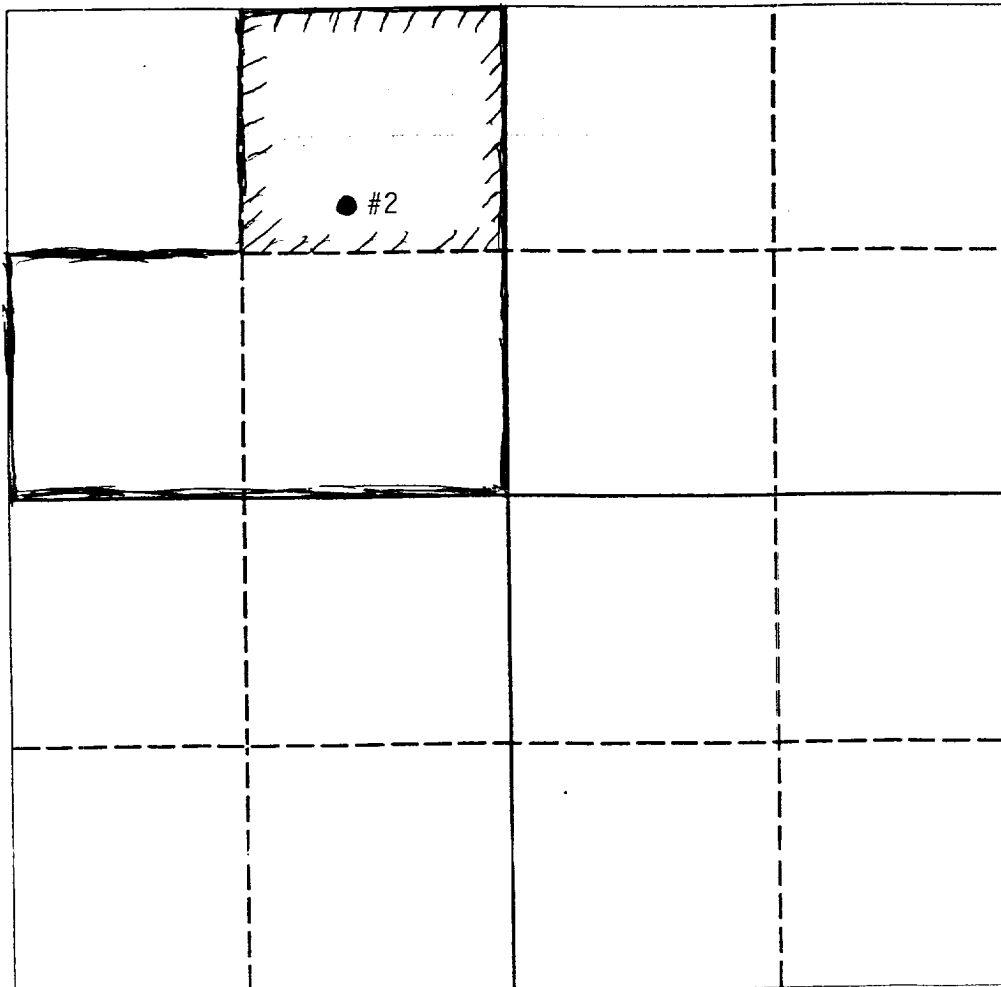
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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.?

☐ Yes ☐ No If answer is "yes" type of consolidation

If answer is "no" 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 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 contained herein is true and complete to the best of my knowledge and belief.

Signature

Printed Name

**Steven L. Burleson**

Position

**Vice-President**

Company

**Lewis B. Burleson, Inc.**

Date

**4/10/97**

**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

Signature & Seal of  
Professional Surveyor

Certificate No.

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0