

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

**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

API NO. ( assigned by OCD on New Wells) 30-025-22245
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

<b>APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK</b>	
1a. Type of Work: DRILL <input type="checkbox"/> RE-ENTER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/>	7. Lease Name or Unit Agreement Name  McGarrity
b. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	8. Well No. 1
2. Name of Operator Team Exploration	9. Pool name or Wildcat Wildcat Yates-Seven Rivers
3. Address of Operator c/o Oil Reports & Gas Services, Inc., P.O. Box 755, Hobbs, NM 88241-0755	
4. Well Location Unit Letter <u>N</u> : <u>660</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>West</u> Line Section <u>6</u> Township <u>20S</u> Range <u>38E</u> NMPM <u>Lea</u> County	

10. Proposed Depth 3665'		11. Formation Yates-Seven Rivers	12. Rotary or C.T. Rotary		
13. Elevations (Show whether DF, RT, GR, etc.) 3579 KB	14. Kind & Status Plug. Bond One Well Bond	15. Drilling Contractor N/A	16. Approx. Date Work will start ASAP		
<b>17. PROPOSED CASING AND CEMENT PROGRAM</b>					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4"	8 5/8" csg		1530'	1000 circ.	
7 7/8"	5 1/2" csg		7089'	1000-TOC 1600'	

Set CIBP @3700' w/ 35' cmt on top  
 Perf Yates-Seven Rivers 3003'-02'-01;  
 2984'-77'-43'-13'; 2890'-89'.  
 Acidize w/1000 gas 15% HCL.  
 Test.

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 Laren Holler TITLE Agent DATE 7/15/93

TYPE OR PRINT NAME Laren Holler (505) 393-2727 TELEPHONE NO.

(This space for State Use)

**ORIGINAL SIGNED BY JERRY SEXTON**  
**DISTRICT I SUPERVISOR**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JUL 19 1993

CONDITIONS OF APPROVAL, IF ANY: