Submit to Appropriate

District Office State Lease-6 copies

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-101 Revised 1-1-89

Fee Lease-5 copies

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT Santa Fe, New Mexico 87504-2088							
P.O. Box 1980, Hobbs, NM 88240					API NO. (assigned by OCD on New Wells)		
DISTRICT II					30-025-04924		
P.O. Drawer Dd, Artesia, NM 88210 DISTRICT III				5. Indicate Type of Le			
			STATE X FEE				
1000 Rio Brazos Rd., Aztec	, Nm 87410		6. State Oil & Gas Lease No.				
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OF PLUG BACK				N/A			
1a. Type of Work:				7. Lease Name or Uni	7. Lease Name or Unit Agreement Name		
DRILL RE-ENTER DEEPEN X PLUG BACK b. Type of Well:					ARROWHEAD GRAYBURG UNIT		
OIL	GAS OTHER						
OIL GAS OTHER SINGLE MULTIPLE WELL ZONE ZONE							
2. Name of Operator				8. Well No.	8. Well No.		
CHEVRON U.S.A. INC.				123	123		
3. Address of Operator				9. Pool name or Wilde	9. Pool name or Wildcat		
P.O. BOX 1150, MIDLAND, TX 79702 ATTN: P.R. MATTHEWS				ARROWHEAD/	ARROWHEAD/GB		
Unit Letter	F : 1980	Feet From The NOR	TH Line	e and 1980	Feet From The WEST Line		
Section	35	Township 21S	Ran	nge 36E	NMPM LEA County	,	
		10. Propor	sed depth	11. Formation	12. Rotary or C.T.		
			4500'	GRAYBURG	ROTARY		
13. Elevation (Show DF,RT, GR, etc.)		14. Kind & Status Plug Bond	15	5. Drig Contractor	16. Date Work will start		
3564 GE		BLANKET		UNKNOWN	'04-01-92		
17 EXISTING CASING AND CEMENT PROGRAM							
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP		
UNK.	8 5/8"	24	263	200	SURFACE		
UNK.	5 1/2"	14	3875	1350	'1220 CAL.		
DEEPEN WELL TO 4500' WITH 4 3/4" BIT UNDERREAM TO 6 1/2" HOLE.							
LOG PERF AND ACIDIZE.							
2000 PSI BOPE.							
MIST AND BRINE WATER MUD SYSTEM.							
WELL NAME CHANGE FROM CHEVRON W.A. RAMSAY NCT-A # 16.							
IN ABOVE SPACE DESCRIBE PROPOSED PROG IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUTIVE ZONE AND PROPOSED							
NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.							

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

TECHNICAL ASSISTANT

DATE

ORIGINAL SIONED BY JERRY SEXTON

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

DATE

DATE

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

330

660

990

1320

1650

1980 2310 2640

2000

1500

1000

500

0

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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

1000 Rio Brazos Rd., Aztec, NM 87410 All Distances must be from the outer boundaries of the section Operator Well No. CHEVRON U.S.A. INC. ARROWHEAD GRAYBURG UNIT 123 Unit Letter Section Township Range County F 35 215 36E LEA Actual Footage Location of Well: feet from the NORTH 1980 line and feet from the WEST line Ground level Elev. **Producing Formation** Pool Dedicated Acreage: 3564 GE GRAYBURG ARROWHEAD 40 Acres 1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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.? ☐ No Yes 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 neccessary. 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 in true and complete to the best of my knowledge and belief. Printed Name P.R. MATTHEWS Position TECHNICAL ASSISTANT Company 1986 CHEVRON U.S.A. INC. 3-16-92 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 supervison, and that the same is true and correct to the best of my knowledge and belief. Date Surveyed Signature & Seal of Professional Surveyor Ceruficate No.