Submit to Appropriate
District Office
State Lease – 6 copies
Fee Lease – 5 copies

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-101
Revised 1-1-89

API NO. (assigned by OCD on New Wells) 30-025-24180

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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 ☐

7. Lease Name or Unit Agreement Name: ALVES

2. Name of Operator: Lanexco, Inc.

8. Well No.: 3

3. Address of Operator: P.O. Box 1206 Jal, NM 88252

9. Pool name or Wildcat: Eumont Yates SRQ

4. Well Location
Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line

Section 18 Township 21S Range 37E NMPM Lea County

10. Proposed Depth	11. Formation	12. Rotary or C.T.
3750 PBTD	Yates SRQ	None

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
3489' KB		None	11-15-93

17. CASING IN HOLE

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12¼"	8 5/8"		1275	NA	CIRC
7 7/8"	5½"	15.5 & 17	4354	NA	1100'

1. Rig up pulling unit.
2. Lay down rods and tubing.
3. Run 5½" CIBP and set at 3750 ft.
4. Dump cement on CIBP.
5. Test casing to 1000#.
6. Perforate zone of interest.
7. Acidize with 6000 gallons of acid & ball sealers.
8. Swab and evaluate.
9. Frac with gelled water and CO2.
10. Flowback and clean out.
11. Place on production.

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 Mike Copland E. TITLE Production Supt. DATE 11-12-93

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY Orig. Signed by Paul Kautz Geologist TITLE DATE NOV 16 1993

CONDITIONS OF APPROVAL, IF ANY: