

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)
30-025-32030
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. B-1167

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work: DRILL ☒ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☐		7. Lease Name or Unit Agreement Name SHELL STATE COM. A			
b. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER ☐ SINGLE ZONE ☒ MULTIPLE ZONE ☐		8. Well No. 6			
2. Name of Operator MERIDIAN OIL INC.		9. Pool name or Wildcat EUMONT YATES 7 RVRS QN PRO GAS			
3. Address of Operator P.O. Box 51810, Midland, TX 79710-1810					
4. Well Location Unit Letter D : 990 Feet From The NORTH Line and 910 Feet From The WEST Line Section 2 Township 21S Range 36E NMPM LEA County					
10. Proposed Depth 3800'		11. Formation QUEEN			
12. Rotary or C.T. ROTARY					
13. Elevations (Show whether DF, RT, GR, etc.) 3530' GR		14. Kind & Status Plug. Bond BLANKET			
15. Drilling Contractor NA		16. Approx. Date Work will start UPON APPROVAL			
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"	28#	400'	325 SXS C	SURF.
7-7/8"	4-1/2"	11.6#	3800'	800 SXS C	SURF.

BOP PROGRAM: 11" - 3M BOP STACK INSTALLED ON THE 8-5/8" CSG AND LEFT ON UNTIL PRODUCTION CASING IS RUN INTO WELL.

REQUEST ADMINISTRATIVE APPROVAL FOR SIMULTANEOUS DEDICATION WITH WELL NO. 5 LOCATED IN L, 3209' FNL & 990' FWL, SEC. 2, T-21-S, R-36-E, LEA COUNTY, N.M. UNDER ADMINISTRATIVE ORDER NSL-3032 (SD). & R-518.

EST. TOPS: ANHY. 1285', T/SALT 1520', B/SALT 2510, YATES 2720', 7-RIVERS 2983, QUEEN 3500'.

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 Maria L. Perez TITLE PRODUCTION ASST. DATE 6-14-93
TYPE OR PRINT NAME MARIA L. PEREZ TELEPHONE NO. 915-688-6906

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

JUN 17 1993

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RECEIVED

JUN 16 1993

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