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) 30-025-09302

5. Indicate Type of Lease STATE [X] 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 [X]

b. Type of Well:
OIL WELL [ ] GAS WELL [X] OTHER SINGLE ZONE [X] MULTIPLE ZONE [ ]

7. Lease Name or Unit Agreement Name: State A A/C 3

2. Name of Operator: Hal J. Rasmussen Operating, Inc.

8. Well No.: 6

3. Address of Operator: Six Desta Drive, Suite 2700, Midland, Texas 79705

9. Pool name or Wildcat: Jalmat-Tnsl-Yts-7R

4. Well Location
Unit Letter J : 1980 Feet From The South Line and 2310 Feet From The East Line

Section 10 Township 23 S Range 36 E NMPM Lea County

| 10. Proposed Depth | 11. Formation | 12. Rotary or C.T. |
|---|---|---|
| PBTD 3420 | Yates | |

| 13. Elevations (Show whether DF, RT, GR, etc.) | 14. Kind & Status Plug. Bond | 15. Drilling Contractor | 16. Approx. Date Work will start |
|---|---|---|---|
| 3435 GR | Current State Wide | | 10-05-90 |

17.
## PROPOSED CASING AND CEMENT PROGRAM

| SIZE OF HOLE | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH | SACKS OF CEMENT | EST. TOP |
|---|---|---|---|---|---|
| | | | | | |
| | SEE CURRENT COMPLETION | | | | |
| | | | | | |

Proposed Operation:

1) Set CIBP at 3420 above existing perforations.
2) Perforate Yates 2900 to 3200.
3) Acidize.
4) Frac.
5) POP.

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 Jay Cherski TITLE Engineer DATE 10-04-90

TYPE OR PRINT NAME Jay Cherski TELEPHONE NO. 505-687-1664

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON SUPERVISOR TITLE DATE OCT 10 1990

CONDITIONS OF APPROVAL, IF ANY:

Approved for recompletion work only--well cannot be produced from Jalmat Gas until NSL has been approved.

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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-102
Revised 1-1-89

## WELL LOCATION AND ACREAGE DEDICATION PLAT
All Distances must be from the outer boundaries of the section

| Operator | Lease | Well No. |
|---|---|---|
| Hal J. Rasmussen Operating, Inc. | State A A/C 3 | 6 |

| Unit Letter | Section | Township | Range | County |
|---|---|---|---|---|
| J | 10 | 23 S | 36E NMPM | Lea |

Actual Footage Location of Well:
1980 feet from the SOUTH line and 2310 feet from the EAST line

| Ground level Elev. | Producing Formation | Pool | Dedicated Acreage: |
|---|---|---|---|
| 3435 | TANSILL-YATES | Jalmat-TNSL-YTS-7R | 320 Acres |

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

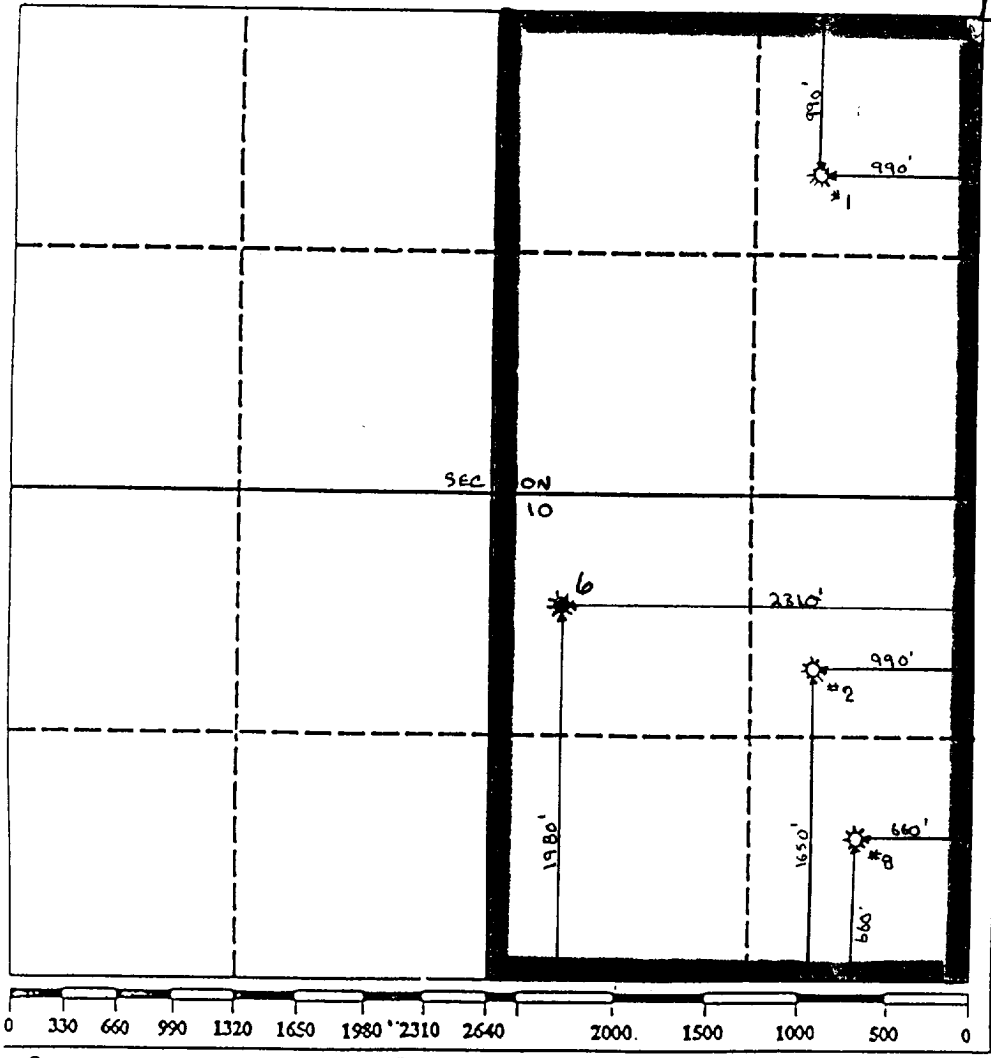
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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.?

☐ 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 in true and complete to the best of my knowledge and belief.*

Signature: Jay D. Cherski

Printed Name: Jay D. Cherski

Position: Agent

Company: Hal J. Rasmussen Operating, Inc.

Date: 10/3/90

### 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

Certificate No.

R-9073 32 mo. Jalmat