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)
30-025-09316

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 1

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

8. Well No.
85

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 F : 2310 Feet From The North Line and 2310 Feet From The West Line

Section 11 Township 23 S Range 36 E NMPM Lea County

10. Proposed Depth	11. Formation	12. Rotary or C.T.
PBTD 3450	Yates	

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
	Current State Wide		8/01/90

17.
PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

Proposed Operations

1) Set CIBP above existing perfs @ 3450.
2) Perforate yates 2950 to 3300.
3) Acidize.
4) Frac.
5) POP.

ok KE

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 Nona Hopkins TITLE Engineering Secretary DATE 7/23/90

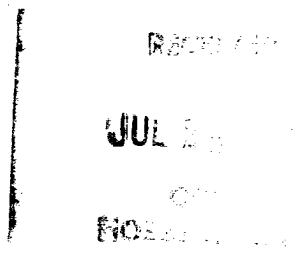
TYPE OR PRINT NAME Nona Hopkins TELEPHONE NO. 915-687-1664

(This space for State Use)

APPROVED BY JERRY SEXTON SUPERVISOR TITLE DISTRICT I DATE JUL 31 1990

CONDITIONS OF APPROVAL, IF ANY:
Approved for recompletion work only--Jalmat gas cannot be produced until NLS is approved.

Workover



Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 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-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 1		85
Unit Letter	Section	Township	Range		County
	11	23 S	36E	NMPM	Lea

Actual Footage Location of Well:
2310 feet from the NORTH line and 2310 feet from the WEST line

Ground level Elev.	Producing Formation	Pool	Dedicated Acreage:
	TANSILL-YATES	Jalmat-TNSL-YTS-7R	480 Acres

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

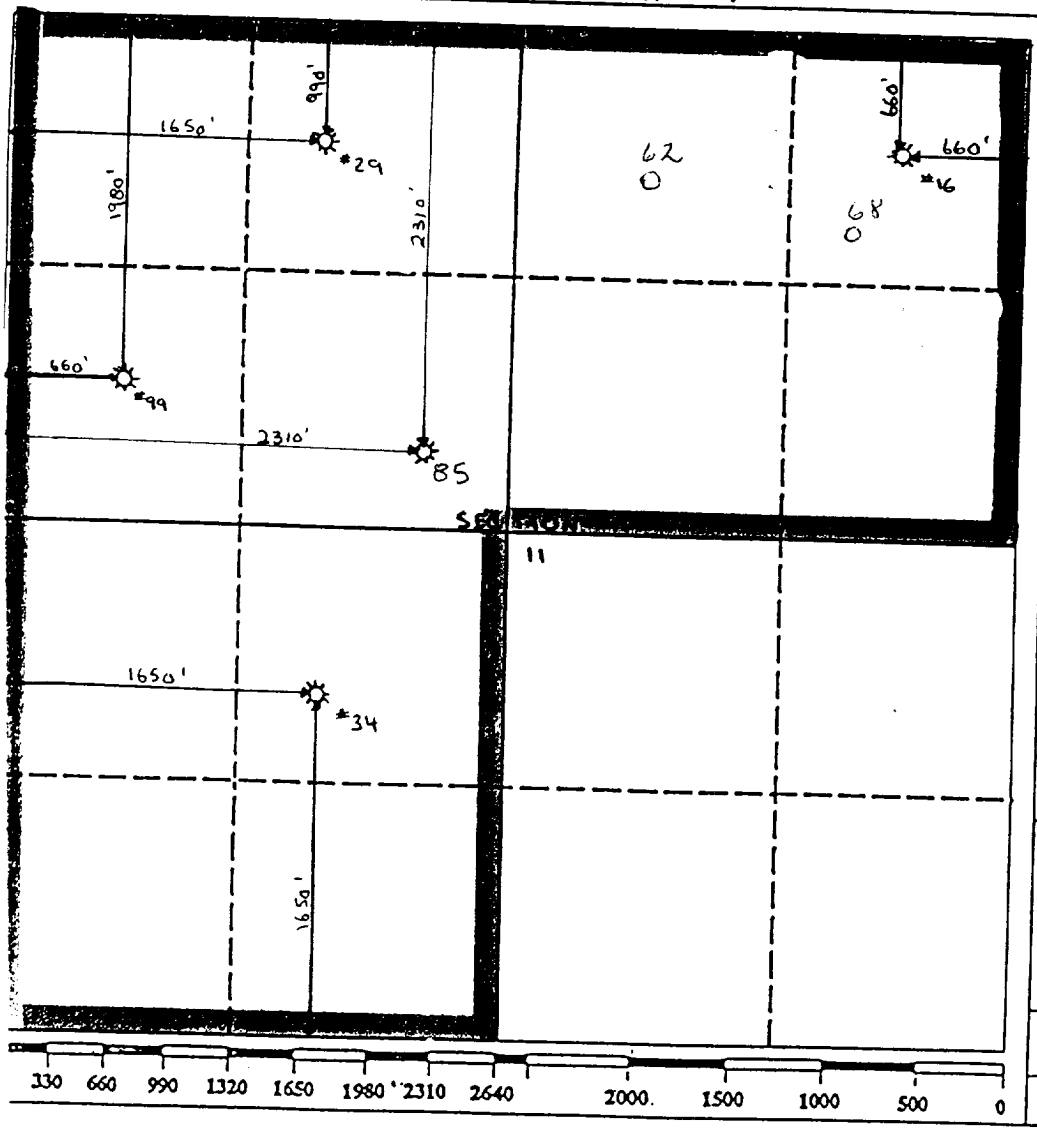
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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 Cherski

Printed Name: Jay D. Cherski

Position: Agent

Company: Hal J. Rasmussen Operating, Inc.

Date: 7-23-90

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.