| Submit to Appropriate District Office State Lease - 6 copies Fee Lease - 5 copies DISTRICT I P.O. Box 1980, Hobbs, NM DISTRICT II P.O. Drawer DD, Artesia, N DISTRICT III 1000 Rio Brazos Rd., Aziee | OIL<br>8 88240<br>IM 88210 | State of New Mex<br>Minerals and Natural Res<br>CONSERVATION<br>P.O. Box 2088<br>Santa Fe, New Mexico | N DIVISION                 | 30-025-0     | 0 <del>9296</del> & 4                      | ATE X FEE                    |  |
|--|----------------------------|---|----------------------------|--------------|--|------------------------------|--|
| APPLICAT   | ION FOR PERMIT             | \///////  |                            |              |  |                              |  |
| la. Type of Work:  DRILL b. Type c. Well: Ol. OAS WELL WELL X  | RE-ENTE                    | R DEEPEN SINGLE   | PLUG BACK X  MULTIPLE ZONE | 7. Lease Nam |  | reement Name                 |  |
| 2. Name of Operator  |                            | 8. Well No.   | 8. Well No.                |              |  |                              |  |
| Hal J. Rasmu   | ssen Operating             |   | 73                         |              |  |                              |  |
| 3. Address of Operator Six Desta Drive, Suite 5850, Midland, Tx 79705  |                            |   |                            |              | 9. Pool name or Wildcat Jalmat Tnsl-Yts-7R |                              |  |
| 4. Well Location Unit Letter C: 660 Feet From The North Line and 1980 Feet From The West Line  |                            |   |                            |              |  |                              |  |
| Section 23 Township 23 S Range 36 E NMPM Lea County  |                            |   |                            |              |  |                              |  |
|  |                            |   |                            |              |  |                              |  |
| 11. 1 PBTD   |                            |   |                            |              |  | 12. Rotary or C.T.           |  |
| 13. Elevations (Show whether DF, RT, GR, etc.) 3352 GL   |                            | <b>14. Kind &amp; Status Plug. Bood</b><br>Current State Wide   | 15. Drilling Contract      | or           | • • •                                      | Date Work will start<br>2/90 |  |
| 17. PROPOSED CASING AND CEMENT PROGRAM   |                            |   |                            |              |  |                              |  |
| SIZE OF HOLE   | SIZE OF CASING             | WEIGHT PER FOOT   | SETTING DEPTH              | SACKS OF     | CEMENT                                     | EST. TOP                     |  |
| 13 3/4   | 9 5/8                      | 32  | 325                        | 300          |  |                              |  |
| 8 3/4  | 7                          | 20  | 3537                       | 250          |  |                              |  |
|  | <u> </u>                   | <u></u>   | <del></del>                |              | <del></del>                                |                              |  |
| Proposed Ope   | erations:                  | Current Status  | s - Langlie Ma             | ttix         |  |                              |  |

- Set CIBP at 3400 (above Langlie Mattix Perfs)
   Perforate Jalmat 2760-3250
- 3) Acidize
  4) Frac
- 5) Put on pump.

| IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.   | TO DEEPEN OR PLUG BACK, GIVE DATA ON I | TRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE |  |  |  |  |  |
|--|--|---|--|--|--|--|--|
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. |  |   |  |  |  |  |  |
| SKINATURE  | mre Agent                              | DATE12/21/89  |  |  |  |  |  |
| TYPEOR PRINT NAME Jay Cherski  |  | <b>ТЕЛЕРНОКЕ NO.</b> 9 <u>15</u> -687-166           |  |  |  |  |  |
| (Thus apace for State Use)  ORIGINAL SIGNED BY JERRY SEXTON  APPROVED BY DISTRICT I SUPERVISOR           | ππ.ε                                   | JAN 0 3 199U  |  |  |  |  |  |
| CONDITIONS OF APPROVAL, IF ANY:  | Reimi<br>Diza t                        | Expires 6 Months From Approvale                     |  |  |  |  |  |