

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)
30-025-10203-25322 ✓

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 ☐

2. Name of Operator

Mobil Producing TX. & N.M. Inc.*

7. Lease Name or Unit Agreement Name

S. E. LONG

3. Address of Operator *Mobil Exploration & Producing U.S. Inc., as Agent for
Mobil Producing TX. & N.M. Inc., P. O. Box 633, Midland, TX 79702

8. Well No.

9

9. Pool name or Wildcat

WANTZ (ABO)

4. Well Location

Unit Letter J : 1780 Feet From The SOUTH Line and 1980 Feet From The EAST Line

Section 11

Township 22S

Range 37E

NMPM LEA

County

10. Proposed Depth

7355

11. Formation

WANTZ ABO

12. Rotary or C.T.

ROTARY

13. Elevations (Show whether DF, RT, GR, etc.)

3355

14. Kind & Status Plug. Bond

ON FILE

15. Drilling Contractor

UNKNOWN

16. Approx. Date Work will start

ASAP

17. PROPOSED CASING AND CEMENT PROGRAM

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

THIS WELL IS PRESENTLY COMPLETED AS AN OIL WELL IN THE PADDOCK POOL (5043-5159).
PERMISSION IS REQUESTED TO RECOMPLETE 158 FEET TO 6752-6910.

- 1) POH W/WS + PUMP. POH W/2-3/8 J-55 TBG.
- 2) SQZ OF PADDOCK PERFS (5043-5159 OA) & DRILL OUT.
- 3) PERF ABO (6752-6910 OA) ACDZ & FRAC.
- 4) RIH W/TBG + WS AND PLACE ABO 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 Judy Dixon TITLE ENGINEERING TECHNICIAN DATE 01/13/92
TYPE OR PRINT NAME J. W. DIXON TELEPHONE NO. (915) 688-2452

(This space for State Use)

ORIGINAL SIGNED BY TERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JAN 15 '92

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
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

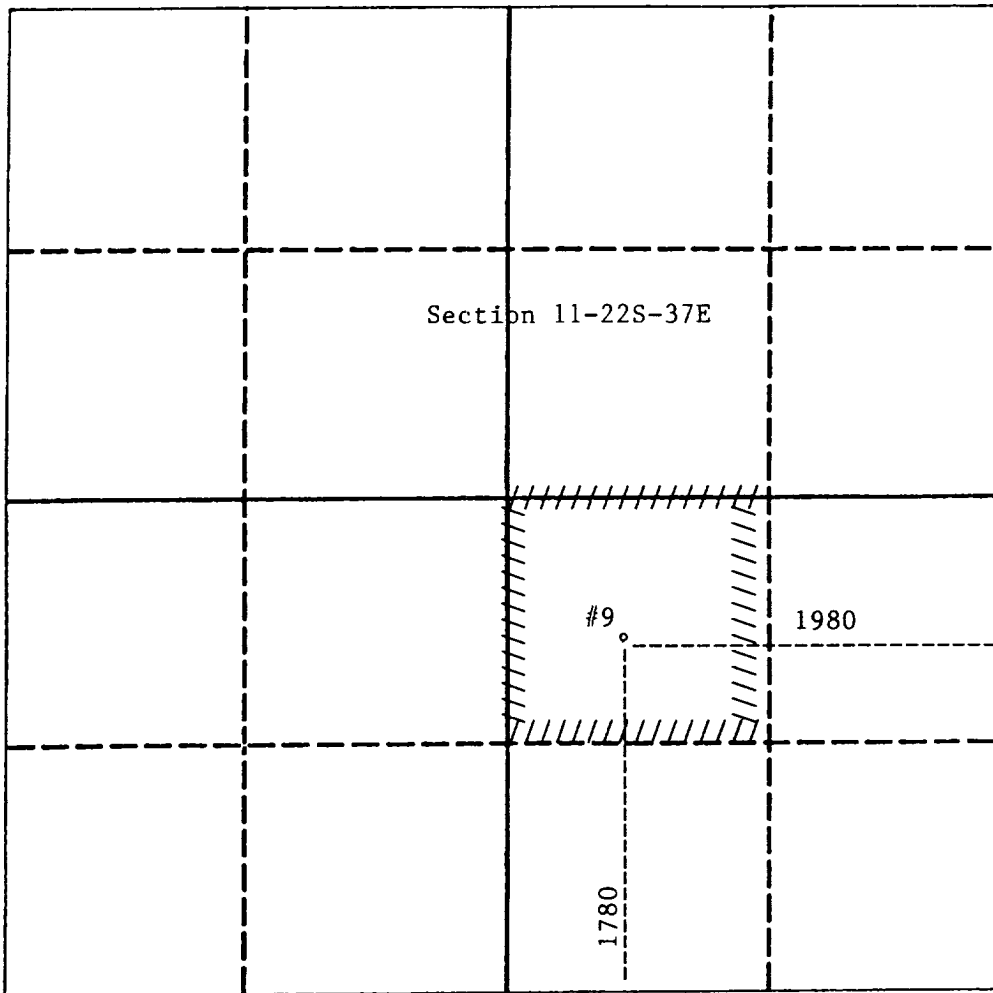
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator MOBIL PRODUCING TX & NEW MEXICO INC.			Lease S. E. LONG		Well No. 9
Unit Letter J	Section 11	Township 22S	Range 37E	County LEA	
Actual Footage Location of Well: 1780 feet from the SOUTH line and 1980 feet from the EAST line					
Ground level Elev. 3351	Producing Formation WANTZ (ABO)		Pool WANTZ (ABO)		Dedicated Acreage: 40 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure 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 is true and complete to the best of my knowledge and belief.

Signature

Printed Name

JUDY WAYNE DIXON

Position

ENV/REGULATORY TECHNICIAN

Company

MOBIL PROD. TX & N.M. INC.

Date

1/9/92

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 supervision, 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.