

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)  
**30-025-25318**

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
V-2274

**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

C.W. Trainer

3. Address of Operator

C/O Oil Reports & Gas Service, P.O. Box 755, Hobbs, NM 88241

7. Lease Name or Unit Agreement Name

RL

8. Well No.

1

9. Pool name or Wildcat

Wildcat

4. Well Location

Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line

Section 16 Township 23S Range 33E NMPM Lea County

10. Proposed Depth

10,700

11. Formation

Bone Springs

12. Rotary or C.T.

Rev. Unit

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

3697 GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

Not Let

16. Approx. Date Work will start

3/25/92

17.

**PROPOSED CASING AND CEMENT PROGRAM**

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2	13 3/8	48#	748	650	circ.
12 1/4	10 3/4	45.5# - 51#	*893 - 5100	900	1900
9 1/2	7 5/8	26.4# - 29.7#	**986 - 12,478	2175	1100
6 1/2	5" liner	10#	12,035 - 15,949	775	

Above casing now in hole

\* cut & pulled from 893'

\*\* cut & pulled from 986'

It is proposed to drill cement plugs to top of 7 5/8" casing stub at 986', run 7 5/8" casing & splice to 7 5/8" stub; drill cement plugs & clean out to 10,700; perf & test Bone Springs at approx. 10,200.

Originally Gulf Oil Corp. Lea "RL" State #1, TD 15,950, P & A 5/23/78

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 Donna Holler TITLE Agent DATE 3/12/92

TYPE OR PRINT NAME Donna Holler TELEPHONE NO. 505-393-2727

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

MAR 16 1992

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval  
Date Unless ~~Drilling~~ Re-entry Underway.

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MAR 18 1992

OCD HOBBS OFFICE

Submit to Appropriate  
District Office  
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Fee Lease - 3 copies

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Energy, Minerals and Natural Resources Department

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Santa Fe, New Mexico 87504-2088

DISTRICT I

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P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

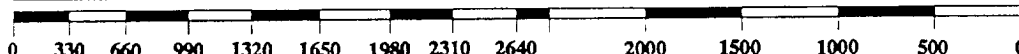
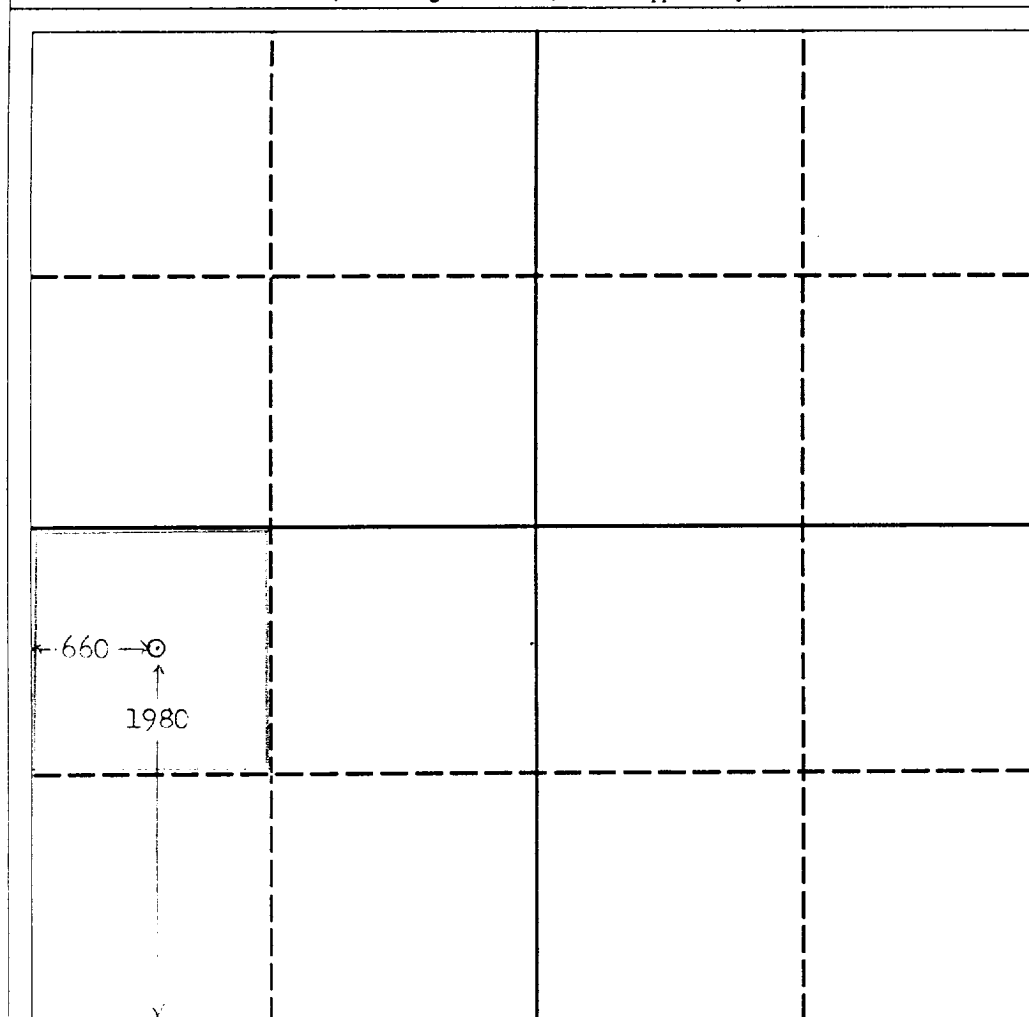
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator C. W. Trainer			Lease RL		Well No. 1
Unit Letter L	Section 16	Township 23 S	Range 33 E	County Lea	
Actual Footage Location of Well: 1980 feet from the South line and 660 feet from the West line					
Ground level Elev. 3697	Producing Formation Bone Springs		Pool Wildcat	Dedicated Acreage: 40 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 is true and complete to the best of my knowledge and belief.

*Donna Holler*  
Signature

Donna Holler

Printed Name

Agent

Position

C. W. Trainer

Company

3/12/92

Date

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

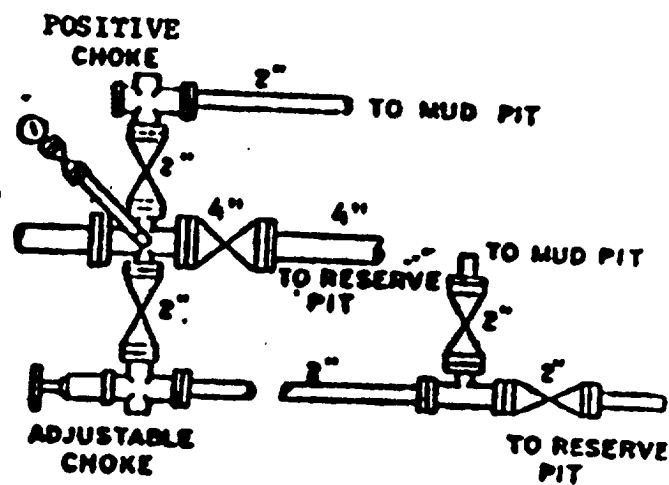
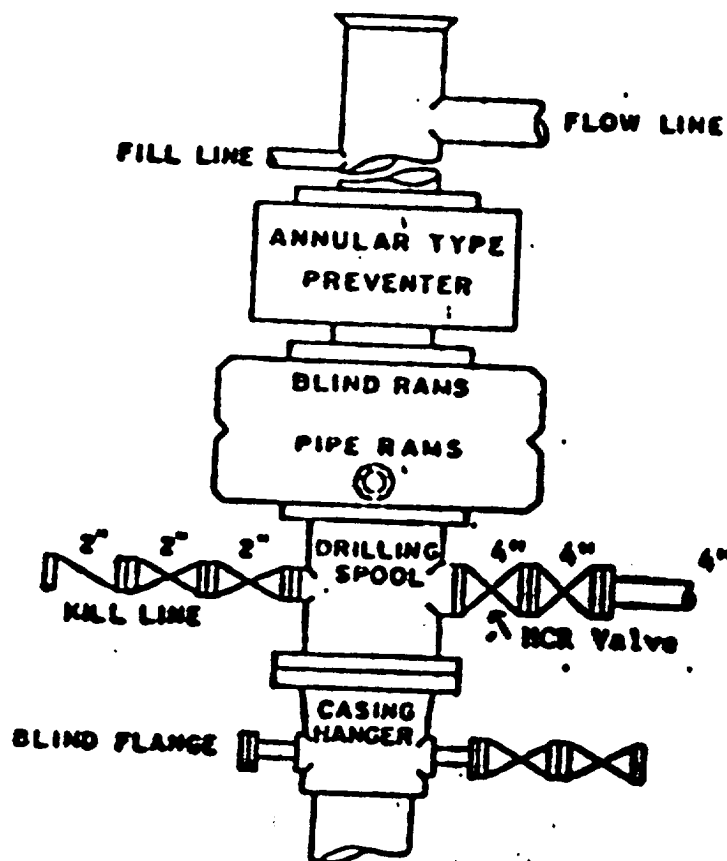
Signature & Seal of  
Professional Surveyor

Certificate No.

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