

Submit to Appropriate
District Office
State Lease-6 copies
Fee Lease-6 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)

30-025-26122

5. Indicate Type of Lease

STATE

☐ FEE

☒ X

8. State Oil & Gas Lease No.

N/A

7. Lease Name or Unit Agreement Name

HUGH

8. Well No.

14

9. Pool name or Wildcat

TUBB OIL & GAS/ WANTZ GRANITE WASH

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OF PLUG BACK

1a. Type of Work:

DRILL ☐

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL

GAS

OTHER

SINGLE

MULTIPLE

WELL ☐

WELL ☒

ZONE ☐

ZONE ☒

2. Name of Operator

CHEVRON U.S.A. INC.

3. Address of Operator

P.O. BOX 1150, MIDLAND, TX 79702 ATTN: P.R. MATTHEWS

4. Well Location

Unit Letter G : 2310 Feet From The NORTH Line and 1980 Feet From The EAST Line
Section 14 Township 22S Range 37E NMPM LEA County

10. Proposed depth

11. Formation

12. Rotary or C.T.

ROTARY

13. Elevation (Show DF, RT, GR, etc.)

3330 GL

14. Kind & Status Plug Bond

BLANKET

15. Orig Contractor

UNKNOWN

16. Date Work will start

6-25-92

17 EXISTING CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
UNKNOWN	8 5/8"	24	1087'	500	SURFACE
UNKNOWN	5 1/2"	15.5	7551'	1780	SURFACE

IT IS PROPOSED TO:

PERFORATE IN THE TUBB POOL AT 5832'-6100'.

STIMULATE POOL PERFORATIONS WITH ACID AND A FRAC.

A PACKER WILL BE SET AT 7320' TO PRODUCE THE WANTZ GRANITE WASH POOL.

FLOW WELL BACK AND RETURN TO PRODUCTION.

IN ABOVE SPACE DESCRIBE PROPOSED PROG 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 P.R. Matthews TITLE TECHNICAL ASSISTANT DATE 6-9-92

TYPE OR PRINT NAME P.R. MATTHEWS TELEPHONE NO. (915)687-7812

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____

MP

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

DISTRICT I
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P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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 CHEVRON U.S.A. INC.			Lease HUGH		Well No. 14
Unit Letter G	Section 14	Township 22S	Range 37E	County LEA	
Actual Footage Location of Well: 2310 feet from the NORTH line and 1980 feet from the EAST line					
Ground level Elev. 3330	Producing Formation Tubb		Pool TUBB/UPARTZ GRANITE WASH	Dedicated Acreage: 40 Acres	

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

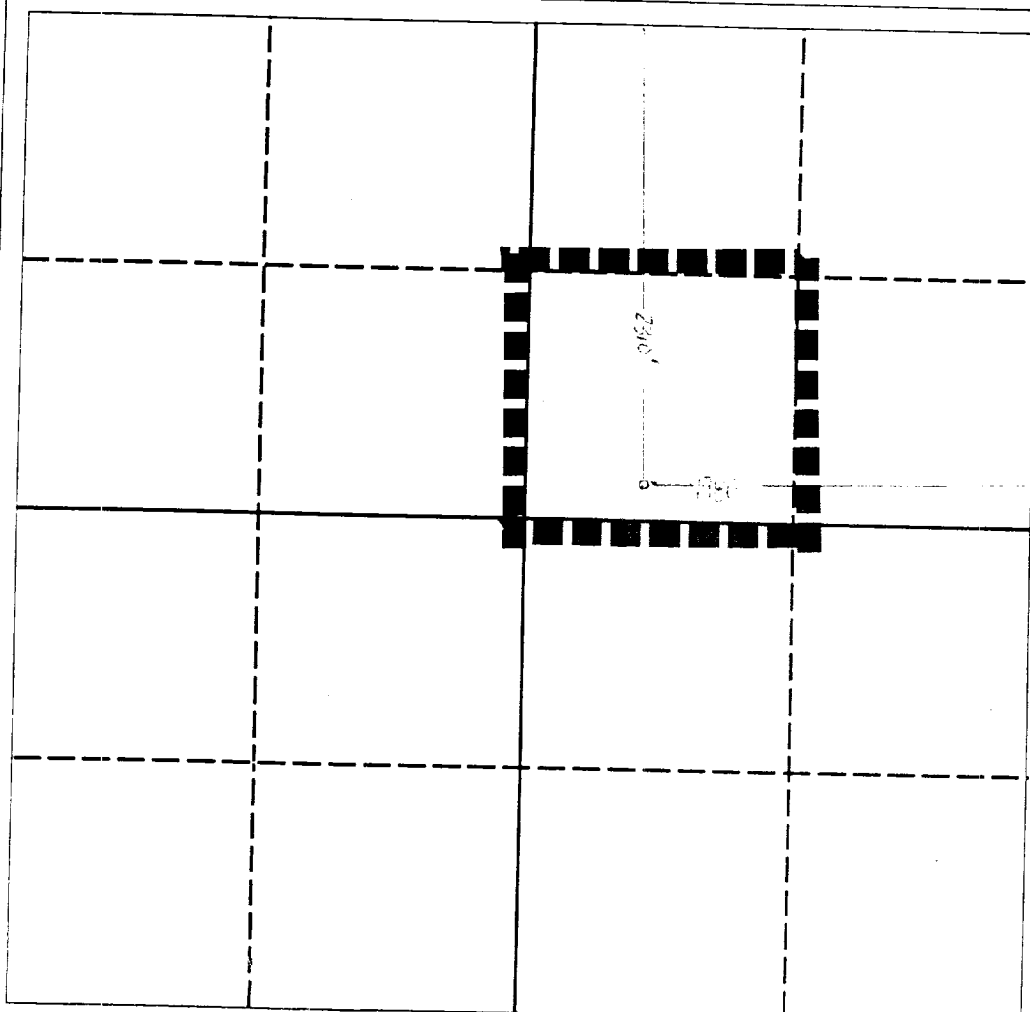
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).

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

Signature

P.R. MATTHEWS

Printed Name

P.R. MATTHEWS

Position

TECHNICAL ASSISTANT

Company

CHEVRON U.S.A. INC.

Date

6/8/92

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.

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0