

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLIC.
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1425.

30-025-29339

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
DRILL ☒ DEEPEN ☐ PLUG BACK ☐

b. TYPE OF WELL
OIL WELL ☒ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. NAME OF OPERATOR
Tempo Energy, Inc.

3. ADDRESS OF OPERATOR
4000 N. Big Spring, Suite 109, Midland, TX 79705

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)
At surface
1650' FSL and 990' FWL, Sec. 35, 23S, R32E
At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
27 air miles west-northwest of Jal, New Mexico

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT.
(Also to nearest drilg. unit line, if any) 330'

16. NO. OF ACRES IN LEASE 320
18. PROPOSED DEPTH 5200'

17. NO. OF ACRES ASSIGNED TO THIS WELL 40
20. ROTARY OR CABLE TOOLS Rotary
22. APPROX. DATE WORK WILL START* July 19, 1985

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
3622.4

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4"	8 5/8"	24#	1200'	Sufficient to Circulate
7 7/8"	5 1/5"	14#	5200'	150 sacks

Pay zone will be selectively perforated and stimulated as needed for optimum production.

Attached are: 1. Well Location and Acreage Dedication Plat
2. Supplemental Drilling Data
3. Surface Use Plan

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. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program if any.

24. SIGNATURE [Signature] TITLE President DATE June 7, 1985

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY [Signature] DATE 7-11-85

CONDITIONS OF APPROVAL, IF ANY: [Signature]

*See Instructions On Reverse Side

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS
ATTACHED