Submit to Appropriate
District Office
State Lease – 6 copies
Fee Lease – 5 copies

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-101
Revised 1-1-89

API NO. (assigned by OCD on New Wells) 30-025-31352

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No. not applicable

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 ☐

7. Lease Name or Unit Agreement Name: Baker "C"

2. Name of Operator: Michael S. Morris

8. Well No.: 2

3. Address of Operator: 816 Ladera, Fort Worth, TX 76108

9. Pool name or Wildcat: Langlie Mattix 7 Rvrs Q Grayburg

4. Well Location
Unit Letter G : 2310' Feet From The North Line and 2310' Feet From The East Line

Section 26 Township 22 South Range 37 East NMPM Lea County

10. Proposed Depth	11. Formation	12. Rotary or C.T.
3900'	Grayburg	Rotary

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
3313 (Ground)	Cash, applied for	Capstar Drilling	August 20, 1991

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12¼ inch	8 5/8 inches	23 lbs.	1150'	700	surface
7 7/8 inch	4½ inches	9½ lbs.	3900'	735	surface

Blowout preventer program is to use a Shaffer LWP 8" double ram type preventor as attached on the CapStar Drilling letterhead.

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 Michael S Morris TITLE _____ DATE _____

TYPE OR PRINT NAME Michael S. Morris TELEPHONE NO 817-448-9304

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE AUG 2 1991

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval Date Unless Drilling Underway.