

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-101
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 6 Copies
Fee Lease - 5 Copies

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address: Yates Petroleum Corporation 105 South Fourth Street Artesia, NM 88210		¹ OGRID Number 25575
		¹ API Number 30 - 025-33574
⁴ Property Code 019307	⁴ Property Name Coriander AOC State	⁴ Well No. 2

⁷ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
H	1	23S	32E		1650	North	330	East	Lea

⁸ Proposed Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
⁹ Proposed Pool 1 Wildcat Undesignated Delaware					⁹ Proposed Pool 2				

¹¹ Work Type Code P	¹¹ Well Type Code O	¹¹ Cable/Rotary Pulling Unit	¹¹ Lease Type Code S	¹¹ Ground Level Elevation 3731'
¹¹ Multiple N	¹¹ Proposed Depth PBSD 8900'	¹¹ Formation Delaware	¹¹ Contractor Unknown	¹¹ Spud Date ASAP

²¹ Proposed Casing and Cement Program

Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
22"	16"	84#	40'	In place	
14-3/4"	11-3/4"	42#	1153'	In place	
11"	8-5/8"	32#	4790'	In place	
7-7/8"	5-1/2"	17# & 15.5#	9170'	In place	

¹¹ Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.

Propose to recompleat to Delaware as follows:

1. TOOH with rods & pump. Nipple up BOP. TOOH with 2-7/8" tubing.
2. Set RBP at 8900'. Test casing to 1750 psi.
3. Perforate 7086-7140' (Cherry Canyon), acidize & frac as necessary.
4. Swab test and return to production.

NOTE: If decision made to commingle Delaware and Bone Springs, will file application with OCD-Santa Fe.

¹¹ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

Title:

Date:

Rusty Klein

Operations Technician

Dec. 30, 1996

Phone:

505-748-1471

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Conditions of Approval:

Attached ☐

ORIGINAL SIGNED BY

GARY WALK

FIELD REP. II

Expiration Date:

Permit Expires 1 Year From Approval
Date Unless Drilling Underway
Plugback

MM



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Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 APT Number 30-025-33574		2 Pool Code ✓		3 Pool Name Wildcat Undesignated Delaware	
4 Property Code 019307		5 Property Name Coriander AOC State			6 Well Number 2
7 OGRID No. 025575		8 Operator Name Yates Petroleum Corporation			9 Elevation 3731'

10 Surface Location

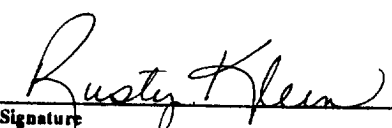
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
H	1	23S	32E		1650	North	330	East	Lea

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres 40	13 Joint or Infill	14 Consolidation Code	15 Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16					1650 330	17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.  Signature Rusty Klein Printed Name Operations Technician Title December 30, 1996 Date	
						18 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 belief. REFER TO ORIGINAL PLAT Date of Survey Signature and Seal of Professional Surveyer:	
						Certificate Number	

