

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

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

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

API NO. (assigned by OCD on New Wells)
30-025-23170 ✓

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work: DRILL ☐ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☒		7. Lease Name or Unit Agreement Name Flat C Sharp			
b. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☒ MULTIPLE ZONE ☐		8. Well No. 1			
2. Name of Operator KELTON OPERATING CORPORATION		9. Pool name or Wildcat Blinebry, West			
3. Address of Operator Post Office Box 276, Andrews, Texas 79714-0276					
4. Well Location Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>11</u> Township <u>23S</u> Range <u>37E</u> NMPM <u>Lea</u> County					
10. Proposed Depth		11. Formation			
12. Rotary or C.T.					
13. Elevations (Show whether DF, RT, GR, etc.) 3262' GL		14. Kind & Status Plug. Bond Blanket			
15. Drilling Contractor		16. Approx. Date Work will start April 10, 1993			
17. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

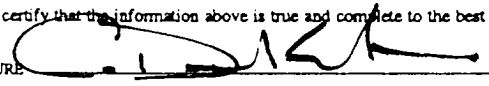
PROPOSED PLUG BACK TO BLINEBRY FORMATION

1. Set Bridge plug at 5800'. Test BP to 3500#. Dump 30' sand on top of plug.
2. Perforate Blinebry at 5352' - 5615'.
3. Acidize with 4000 gallons 15% NeFe acid.
4. Swab and Test.
5. Frac down 2 7/8" tubing under packer with 36,000 gallons 50/50 CO2 and 70,000# 20/40 sand.
6. Swab or flow and test.

6" 600 series double ram blow out preventer

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  TITLE President DATE 3-16-93
TYPE OR PRINT NAME C. Dale Kelton TELEPHONE NO. 915-523-6535

(This space for State Use)

ORIGINAL MONITOR BY JERRY SEXTON

APPROVED BY _____ TITLE _____ DATE MAR 10 1993
CONDITIONS OF APPROVAL, IF ANY: