

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)

30-025-30870

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

NA

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

Red Cloud

2. Name of Operator

Tahoe Energy, Inc.

8. Well No.

2

3. Address of Operator

3909 W. Industrial, Midland, Texas 79703

9. Pool name or Wildcat

Jalmat Tansill Yates 7-R

4. Well Location

Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Line

Section 3 Township 25-S Range 37-E NMPM Lea County

10. Proposed Depth

3200

11. Formation

Yates, Seven Rivers

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

3148.7 GR

14. Kind & Status Plug Bond

Blanket on File

15. Drilling Contractor

Unknown

16. Approx. Date Work will start

April 25, 1990

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8-5/8"	24#	350'	250	circulate
7-7/8"	4-1/2"	10.5#	3200'	700	circulate

1.) Double ram blowout preventors will be used.

2.) Form C-102 is attached.

3.) Completion will be through 4 1/2" casing, selectively perforated, acidized, and fracture treated to stimulate the Yates - Seven River perforated intervals.

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 J. A. Freeman TITLE President

DATE April 17, 1990

TYPE OR PRINT NAME K. A. Freeman

TELEPHONE NO. 915/697-7938

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APR 19 1990

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

NSP(R 903)