

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

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)

30-025-31860

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 ☐

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

South Justis Unit "E"

2. Name of Operator

ARCO OIL AND GAS COMPANY

8. Well No.

190

3. Address of Operator

Box 1610, Midland, Texas 79702

9. Pool name or Wildcat

Justis Blinbry-Tubb-
Drinkard

4. Well Location

Unit Letter D : 200 Feet From The North Line and 150 Feet From The West Line

Section 24

Township 25S Range 37E

NMPM Lea

County

10. Proposed Depth

6200

11. Formation

Blibry-Tubb-Dkrd

12. Rotary or C.T.

Rotary

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

3090 GR

14. Kind & Status Plug. Bond

Statewide

15. Drilling Contractor

Grace Drlg. Co.

16. Approx. Date Work will start

2-1-93

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4	8-5/8	24	1000	400	Surf
7-7/8	4-1/2	9.5	6200	1200	Surf
			DVT @3300		

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 Ken W. Gosnell TITLE Regulatory Coordinator DATE 1-8-93

TYPE OR PRINT NAME Ken W. Gosnell 915/688-5672 TELEPHONE NO.

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

DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

R-9747 uniminated NSL

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

JAN 19 1993

Submit to Appropriate
District Office
State Lease - 4 copies
Fee Lease - 3 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

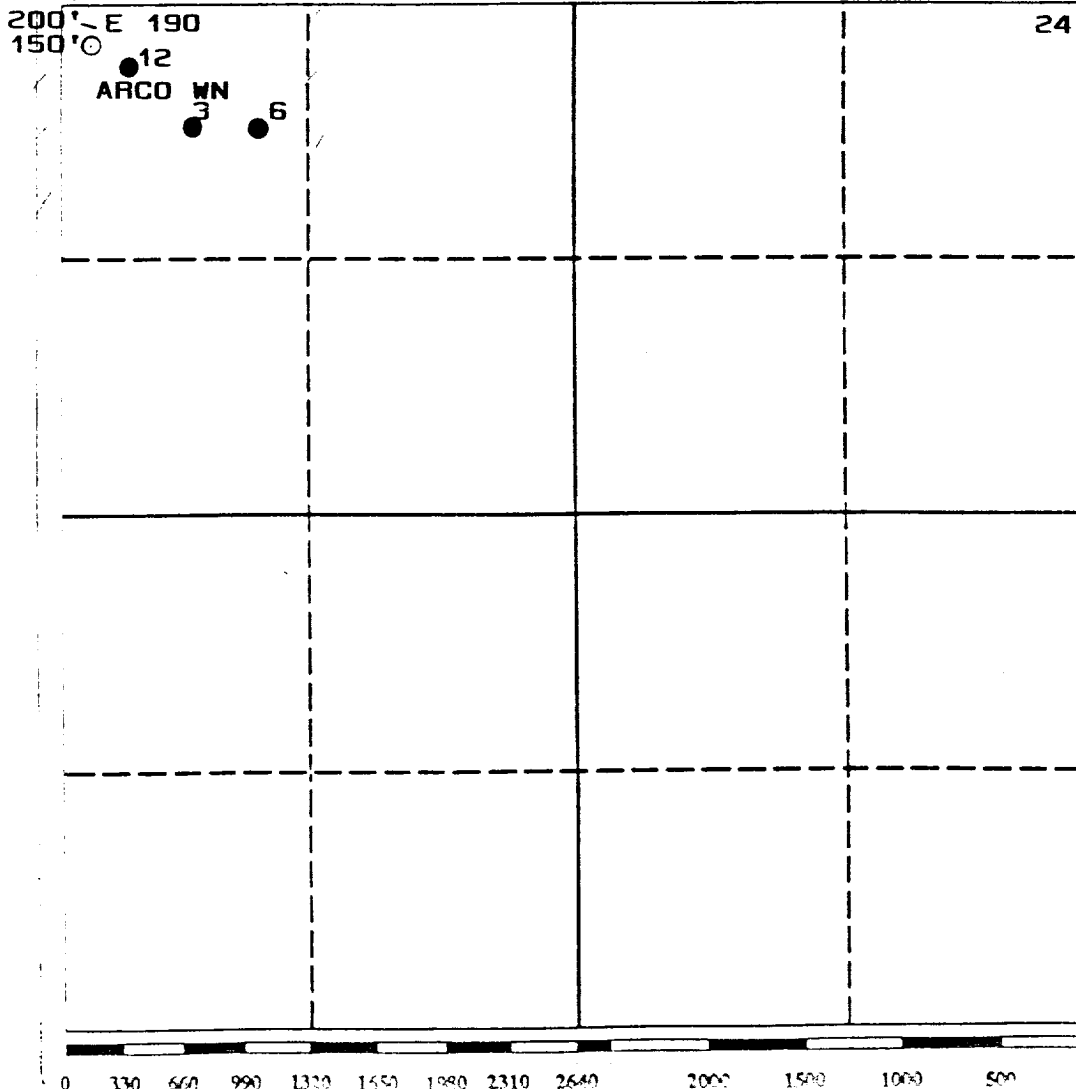
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator		Lease		Well No.	
ARCO OIL AND GAS COMPANY		South Justis Unit "E"		190	
Section	Township	Range	County		
D 24	25 S	37 E	NM PM Lea		
Actual Footage Location of Well:					
200 feet from the North line and		150 feet from the West line			
Ground level Elev.	Producing Formation	Pool	Dedicated Acreage:		
3090'	Blinebry - Tubb - Drinkard	Justis	40 Acres		
<p>1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.</p> <p>2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).</p> <p>3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No If answer is "yes" type of consolidation _____</p> <p>If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____</p> <p>No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.</p>					



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature *Ken W. Gosnell*

Ken W. Gosnell

Printed Name

Reg. Coord.

Position

ARCO Oil and Gas Co.

Company

12-7-92

Date

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 knowledge and belief.

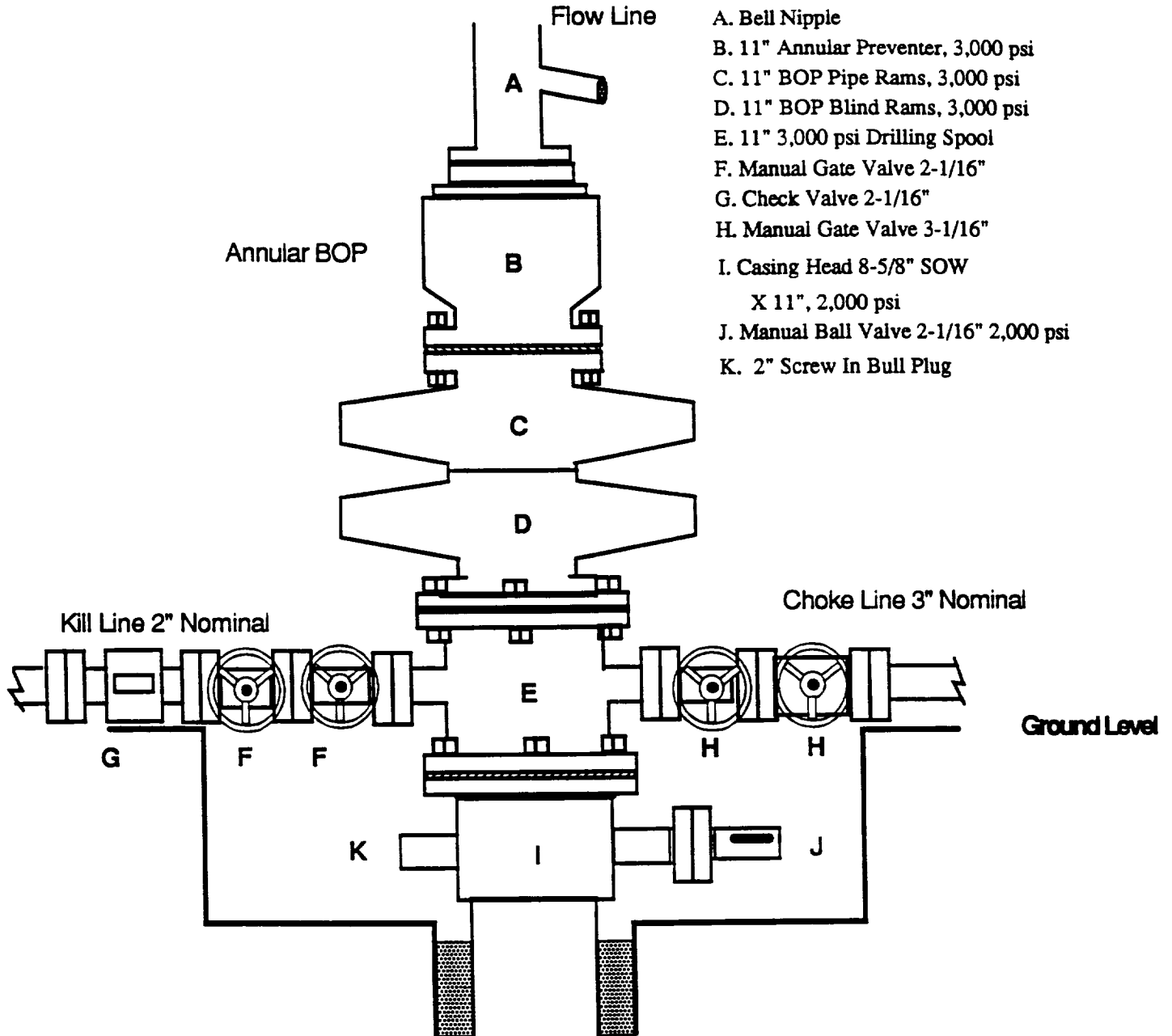
Date Surveyed

Nov. 2, 1992

Signature & Seal of Professional Surveyor

[Signature]
Certificate No. 648

BOP REQUIREMENTS



10-10-10

4-7-8
FBI

RECEIVED
JAN 10 1971
FBI