

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

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

API NO. (assigned by OCD on New Wells)

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-229-2

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 "G"

2. Name of Operator

ARCO OIL AND GAS COMPANY

8. Well No.

290

3. Address of Operator

Box 1610, Midland, Texas 79702

9. Pool name or Wildcat

Justis Blinbry-Tubb-
Drinkard

4. Well Location

Unit Letter

J

1450

Feet From The

South

Line and

1610

Feet From The

East

Line

Section

36

Township

25S

Range

37E

NMPM

Lea

County

10. Proposed Depth

6200

11. Formation

Blinbry-Tubb-Dkrd

12. Rotary or C.T.

Rotary

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

3025 GR

14. Kind & Status Plug. Bond

Statewide

15. Drilling Contractor

Grace Drilg. Co.

16. Approx. Date Work will start

2-15-94

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	600	Surf
7-7/8	4-1/2	10.5	6200	1200	Surf

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

Agent

DATE

12-15-93

TYPE OR PRINT NAME

Ken W. Gosnell

915/688-5672

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY DISTRICT SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

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

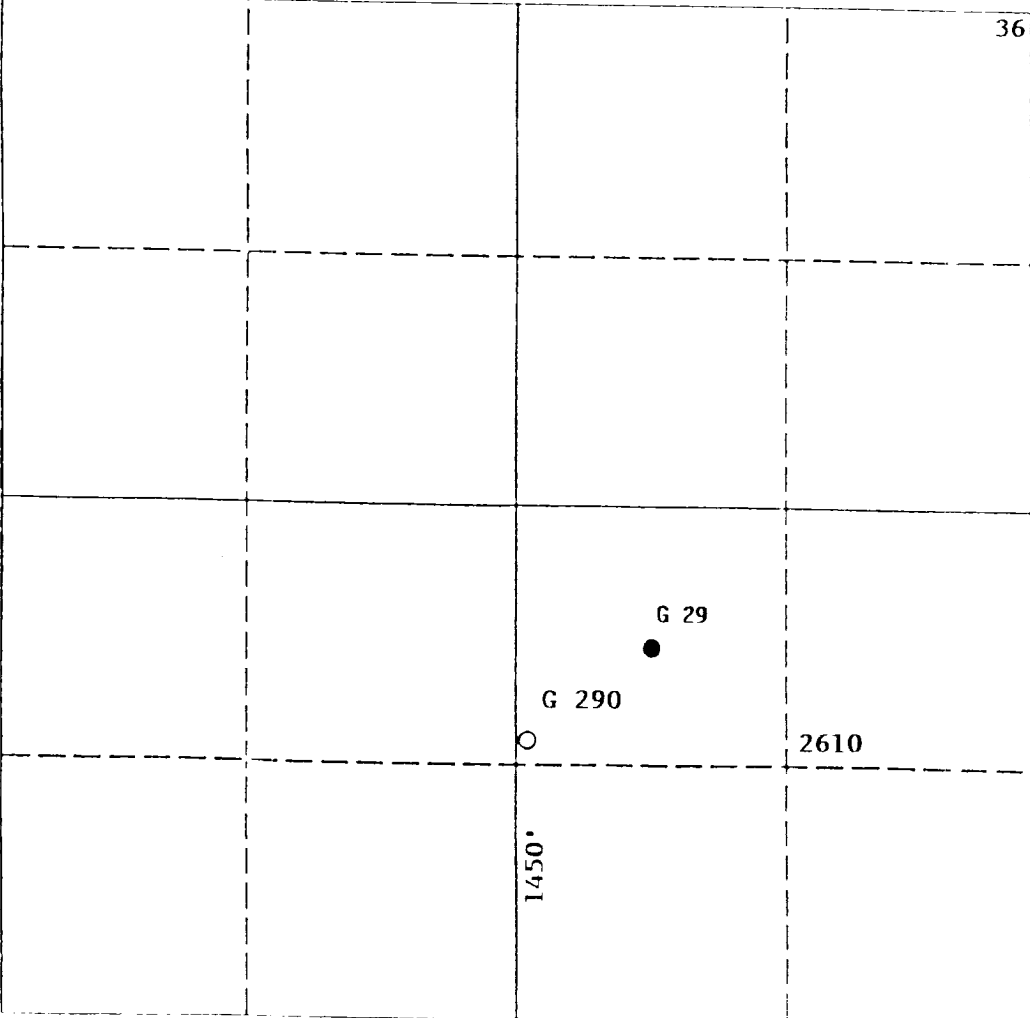
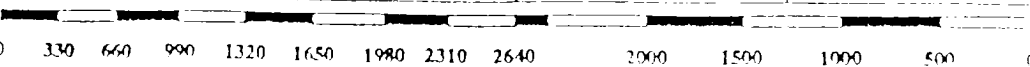
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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator		Lease		Well No	
ARCO OIL AND GAS COMPANY		South Justis Unit "G"		290	
Unit Letter	Section	Township	Range	County	
J	36	25 S	37 E	Lea	
Actual Footage Location of Well:					
1450 feet from the South line and		2610 feet from the East line		Dedicated Acreage:	
Ground level Elev		Producing Formation		Pool	
3025'		Blbry-Tubb-Dkrd		Justis	
40 Acres					
1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below. 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). 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.? ☐ Yes ☐ No If answer is "yes" type of consolidation If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) 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.					
				OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. <i>Ken W. Gosnell</i> Signature Ken W. Gosnell Printed Name Agent Position ARCO Oil & Gas Company Company 12-14-93 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 Sept. 23, 1993 Signature & Seal of Professional Surveyor <i>Jim Saunders</i> Certificate No. 648	

BOP REQUIREMENTS

