

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)

32-125-32404

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

<001500>

South Justis Unit "E"

8. Well No.

132

9. Pool name or Wildcat <34220>  
Justis Blbry-Tubb-Dkrd

2. Name of Operator

ARCO OIL AND GAS COMPANY

3. Address of Operator

Box 1610, Midland, Texas 79702

4. Well Location

Unit Letter M

1200 Feet From The South Line and 1150 Feet From The West Line

Section

12

Township

25S

Range

37E

MPM

Lea

County

10. Proposed Depth

6200

11. Formation

Blbry-Tubb-Dkrd

12. Rotary or C.T.

Rotary

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

3106 GR

14. Kind & Status Plug Bond

Statewide

15. Drilling Contractor

Grace Drll Co

16. Approx. Date Work will start

2-10-94

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	24.0	1000	600	surface
7-7/8	4-1/2	10.5	6200	1200	surface

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

9.5 688-5672 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE JAN 26 1994

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

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

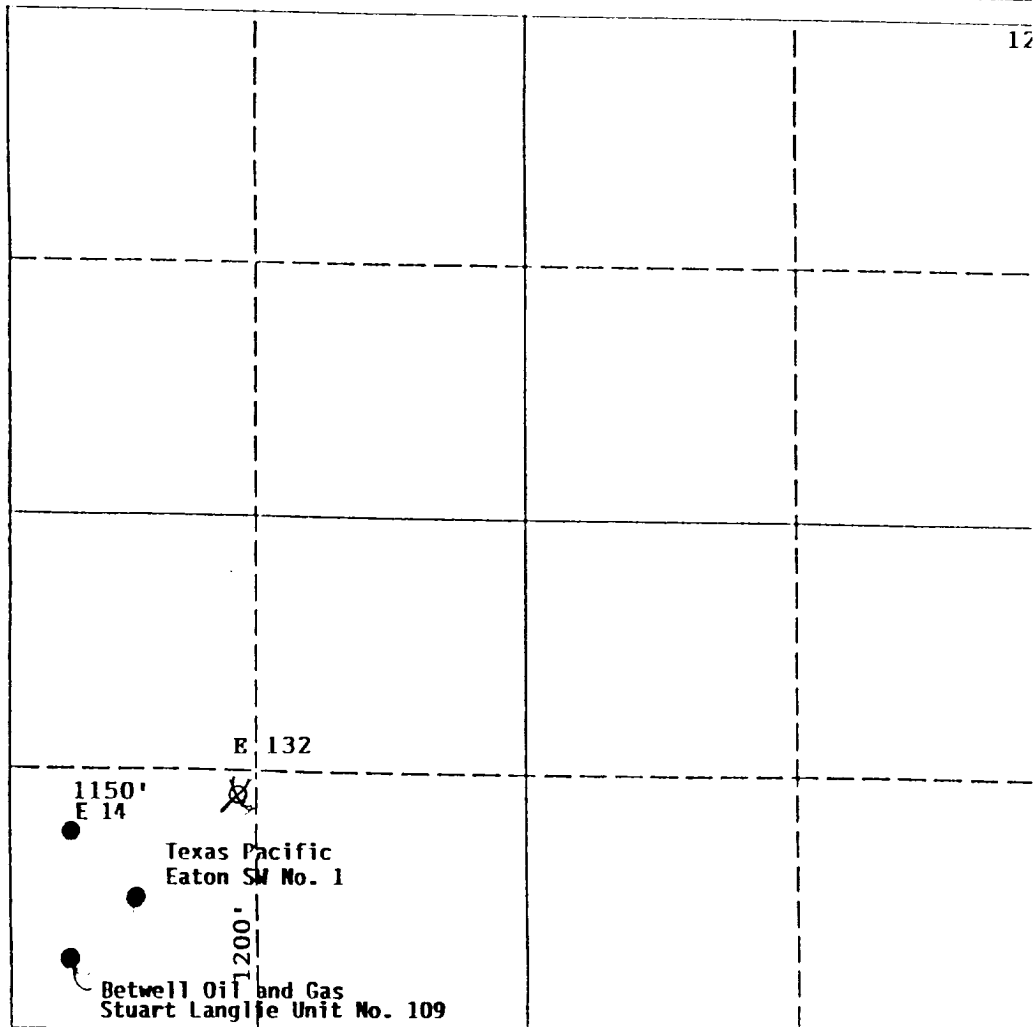
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator <b>ARCO OIL AND GAS COMPANY</b>			Lease <b>South Justis Unit "E"</b>		Well No. <b>132</b>
Unit Letter <b>M</b>	Section <b>12</b>	Township <b>25 S</b>	Range <b>37 E</b>	County <b>Lea</b>	
Actual Footage Location of Well: <b>1200</b> feet from the <b>South</b> line and <b>1150</b> feet from the <b>West</b> line Ground level Elev. <b>3106'</b> Producing Formation <b>Blbry-Tubb-Dkrd</b> Pool <b>Justis</b> Dedicated Acreage: <b>40</b> Acres					

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- 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.

Signature  
*Ken W. Gosnell*  
Printed Name  
**Ken W. Gosnell**  
Position  
**Agent**  
Company  
**ARCO Oil & Gas Company**  
Date  
**12-14-93**

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. 24, 1993**  
Signature & Seal of Professional Surveyor  
*[Signature]*  
Certificate No.  
**648**

## BOP REQUIREMENTS

