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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5A. Indicate Type of Lease  
STATE ☒ FEE ☐

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work  
b. Type of Well DRILL ☒ DEEPEN ☐ PLUG BACK ☐  
OIL WELL ☒ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☒

7. Unit Agreement Name

8. Farm or Lease Name

Chesley 31 State

9. Well No.

1

10. Field and Pool, or Wildcat

Wildcat

2. Name of Operator  
Getty Oil Company  
3. Address of Operator  
P. O. Box 728, Hobbs, New Mexico 88240

4. Location of Well  
UNIT LETTER E LOCATED 1650 FEET FROM THE North LINE  
AND 660 FEET FROM THE West LINE OF SEC. 31 TWP. 10S RGE. 35E NMPM

12. County

Lea

19. Proposed Depth 13,300'	19A. Formation Siluro-Devonian	20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) 4128.2' GL	21A. Kind & Status Plug. Bond Blanket on file	21B. Drilling Contractor To be determined
		22. Approx. Date Work will start November 15, 1984

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	48#	435'	450 sxs	Circulate
12-1/4"	8-5/8"	28# & 24#	4,600'	2100 sxs	Circulate
7-7/8"	5-1/2"	20# & 17#	13,300'	2500 sxs	13,300-4200'

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 5/6/85  
UNLESS DRILLING UNDERWAY

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.

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

Signed WAB Title District Operations Manager Date November 2, 1984

(This space for State Use)

ORIGINAL COPIES TO BE FILED IN SECTION

APPROVED BY DO NOT SIGN HERE TITLE \_\_\_\_\_ DATE NOV - 6 1984

CONDITIONS OF APPROVAL, IF ANY:

**NE E OIL CONSERVATION COMMISSIC  
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section

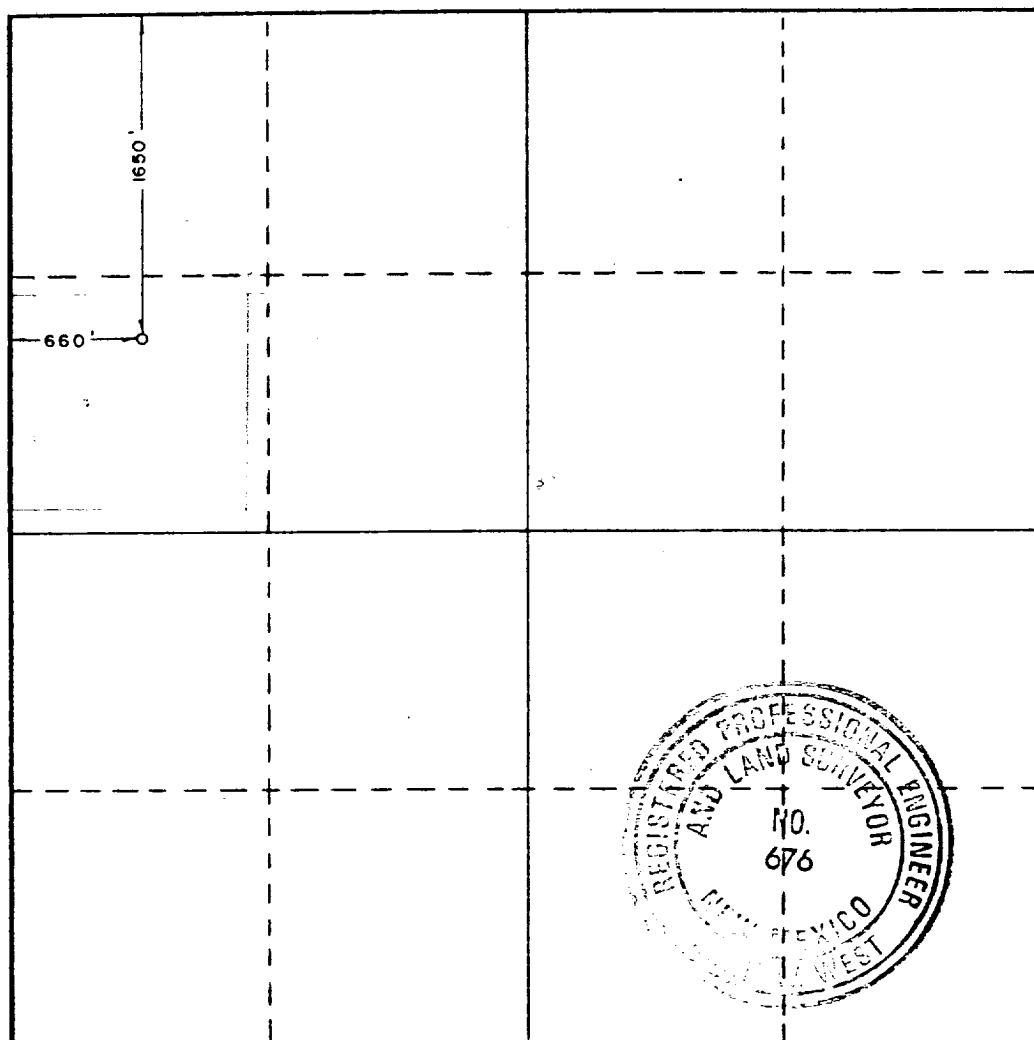
Operator <b>GETTY OIL CO.</b>		Lease <b>CHESLEY 31 STATE</b>		Well No. <b>1</b>
Unit Letter <b>E</b>	Section <b>31</b>	Township <b>10S</b>	Range <b>35E</b>	County <b>LEA</b>
Actual Footage Location of Well:				
<b>1650</b> feet from the <b>NORTH</b> line and <b>660</b> feet from the <b>WEST</b> line				
Ground Level Elev. <b>4128.2</b>	Producing Formation	Pool	Dedicated Acreage:  Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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 interests 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 interests, has been approved by the Commission.



**CERTIFICATION**

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

*W H Baker II*

Name \_\_\_\_\_

Position  
**District Operations Mgr.**

Company  
**Texaco Inc.**

Date  
**November 2, 1984**

*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  
**8/27 & 28/84**

Registered Professional Engineer and/or Land Surveyor  
*John W. West*

Certificate No. **JOHN W. WEST, 676**  
**RONALD J. EIDSON, 3239**

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600