

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

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)

30-025-30998

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

State A A/C 1

2. Name of Operator

Hal J. Rasmussen Operating, Inc.

8. Well No.

125

3. Address of Operator

Six Desta Drive, Suite 2700, Midland, Texas 79705

9. Pool name or Wildcat

Jalmat TnsL-Yts-7R

4. Well Location

Unit Letter N : 990 Feet From The South Line and 1650 Feet From The West Line

Section 22

Township 23 S

Range 36 E

NMPM

Lea

County

10. Proposed Depth

3500

11. Formation

Queen SR

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)
3426

14. Kind & Status Plug. Bond
Current State Wide

15. Drilling Contractor
to be selected

16. Approx. Date Work will start
8/20/90

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
14 3/4	10 3/4	32.75	300	200	Surface
9 7/8	7	20	3500	300	2000'

Proposed Operations:

Drill 14 3/4" hole to 300' w/ fresh water mud; set 10 3/4 casing and cement to surface;
Drill 9 7/8" hole to 3500' or top of Queen; Log w/ Laterolog, Neutron Density, Gamma Ray
and Caliper; Run 7" casing and cement w/ 300 sacks;

Blowout Preventer Program : 0-300 - None
300-TD - Double Ram Preventer w/ hydric and choke manifo

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PROD 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

Nona Hopkins

TITLE

Secretary

DATE 8/27/90

TYPE OR PRINT NAME

Nona Hopkins

TELEPHONE NO. 915-

(This space for State Use)

ORIGINAL FILED BY JERRY LEITON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

**Cement on 7" must be tied back to surface casing. Permit Expires 6 Months From Approval Date Unless Drilling Underway.

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Energy, Minerals and Natural Resources Department

Form C-102
Revised 1-1-89

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WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator HAL RASMUSSEN OPERATING CO.			Lease State A Account 1		Well No. 125
Unit Letter N	Section 22	Township 23 South	Range 36 East	County Lea	

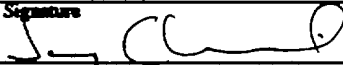
Actual Footage Location of Well:

990	feet from the	South	Line and	1650	feet from the	West	Line
Ground level Elev. 3426.0	Producing Formation YATES - 7R		Pool JALMAT TNSL-YTS-7R		Dedicated Acreage: 280 Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or inkline 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.

Signature	
Printed Name	JAY CHERSKI
Position	ENGINEER
Company	HAL J RASMUSSEN OPER
Date	8/31/90

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	August 23, 1990
Signature & Seal of Professional Surveyor	
Certificate No.	JOHN W. WEST, 676 RONALD J. ENDSON, 3239

