

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)

30-025-31346

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

Hodge

2. Name of Operator

Meridian Oil Inc.

8. Well No.

4

3. Address of Operator

P.O. Box 51810, Midland, TX 79710-1810

9. Pool name or Wildcat

Jalmat-Tansil-Yates-7 Rivers

4. Well Location

Unit Letter G : 1660 Feet From The North Line and 1980 Feet From The East Line

Section 8 Township 24-S Range 37-E NMPM Lea County

10. Proposed Depth

3450'

11. Formation

Yates Sand

12. Rotary or C.T.

Rotary

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

3281.4' GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

NA

16. Approx. Date Work will start

Upon Approval

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" | 28# | 400' | 250 SXS | Surface |
| 7-7/8" | 4-1/2" | 11.6# | 3450' | 900 SXS | Surface |
| | | | | | |

Simultaneous Dedication with well No 2. Adm. Order SD-91-10 dated 7-8-91

located in B, 330' FNL & 2310' FEL, Sec. 8

160 acre Non-Standard gas proration unit previously approved-Order No. R-559, dated Dec. 16, 1954.

Estimated Tops: Red Beds 350'

Rustler 1125'
Salado 1240'
Tansil 2520'
Yates 2750'
Seven Rivers 2975'
Queen 3350'

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 Maria L. Perez TITLE Regulatory Compliance Rep. DATE 8-1-91

TYPE OR PRINT NAME Maria L. Perez

TELEPHONE NO. 915-686-5767

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.