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5A. Indicate Type of Lease	
STATE ☒	FEE ☐
5. State Oil & Gas Lease No.	
L-3674	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL ☒ DEEPEN ☐ PLUG BACK ☐		8. Farm or Lease Name	
OIL WELL ☒ GAS WELL ☐ OTHER ☐		State HQ	
2. Name of Operator		9. Well No.	
AMOCO PRODUCTION COMPANY		5	
3. Address of Operator		10. Field and Pool, or Wildcat	
P. O. Box 68, Hobbs, NM 88240		Airstrip Wolfcamp	
4. Location of Well		12. County	
UNIT LETTER J LOCATED 1980 FEET FROM THE South LINE		Lea	
AND 1980 FEET FROM THE East LINE OF SEC. 26 TWP. 18-S RCC. 34-E NMPM			
19. Proposed Depth		19A. Formation	20. Rotary or C.T.
11,100		Wolfcamp	Rotary
21. Elevations (show whether DT, HT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start
3979.6'	Blanket-on-file	N/A	Mid March

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#	300'	Circulate	surface
11" or 12-1/2"	8-5/8"	24#, 32#	4000'	tieback to 13-3/8"	300'
7-7/8"	5-1/2"	17#, 15.5#, 17#	1100'	tieback to 500'	
				above Bone Springs	7350'

Propose to drill and equip well in the Bone Springs or Wolfcamp formation. After reaching TD, logs will be run and evaluated. Perforate and/or stimulate as necessary in attempting commercial production.

Mud Program: 0 - 300' Native
300 - 4000' Brine
4000'-TD Cut brine

APPROVAL VALID FOR 180 DAYS

PERMIT EXPIRES 9/1/84

BOP Diagram attached.

UNLESS DRILLING UNDERWAY

O+6-NMOCD, H 1-R. E. Ogden, HOU Rm. 21.150 1-F. J. Nash, HOU Rm. 4.206 1-GCC 1-Pacific Lighting

4. 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 Jerry Sexton Title Assist. Admin. Analyst Date 2-28-84

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE MAR 1 1984

CONDITIONS OF APPROVAL, IF ANY:

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FEB 29 1984
G.C.D.
HONORS OFFICE