Subril 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

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

30-007-20083		
5. Indicate Type of Lease STATE	FEE	$\overline{\mathbf{x}}$

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aziec	, NM 87410			6. State Oil	& Gas Lease N	io.	
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK							
la. Type of Work:				7. Lease Nat	ne or Unit Ago	reement Name	
DRILL	RE-ENTER	DEEPEN	PLUG BACK	I	emmer Ca	nyon	
b. Type of Well:		SINGLE	MULTIPLE	30 18			
MET BY	one Coal Met	hane zo ne l	X ZONE	(T) (R)			
2. Name of Operator				8. Well No.		ĺ	
Pennzoil Expl	oration and Pro	duction Company		253B			
3. Address of Operator				9. Pool name		(
P.O. Box 2967	, Houston, TX	77252		ω .	Ideat		
4. Well Location Unit Letter B	: 300 Feet Fr	om The <u>north</u>	Line and221	4 Feet	From The <u>e</u>	ast Line	
Section 25	Towns	ip 30N Ran	ge 18E	NMPM (Colfax	County	
		10. Proposed Depth		. Formation	•	12. Rotary or C.T.	
		//// 2300'		<u>Vermejo</u>		Rotary	
13. Elevations (Show whether	er DF, RT, GR, etc.)	1. Kind & Status Plug. Bond	15. Drilling Contract	OF	••	Date Work will start	
7797_GR	L_	<u>blanket</u>			June 2	4, 1989	
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	350 '	175		surface	
7-7/8"	5-1/2"	17	2300'	450		surface	
						L	

- 1. Drill 12-1/4" hole to 350' with air
- 2. Set 8-5/8" casing and cement to surface
- 3. Drill 7-7/8" hole to 1800' w/air then mud to TD 4. Set 5-1/2" casing to 2300' and cement to surface
- 5. The well will be completed by perforation in L. Vermejo with 2-7/8" tubing.

VERBOUND FOR 90 DAYS

18:L2 US DANLLOC C CONVARY	OF COMMERCATION COME WITHIN MATHOURS OF E	
N ABOVE SPACE DESCRIBE PROPOSED PROGRAM: #PROPOSAL DNE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.	, IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUC	CTIVE ZONE AND PROPOSED NEW PRODUCTIVE
hereby certify that the information above is true and complete to the best of my kind information above is true and complete to the best of my kind information and information above is true and complete to the best of my kind information and information and information above is true and complete to the best of my kind information and information and information above is true and complete to the best of my kind information above is true and complete to the best of my kind information and in	project Manager	DATE 4/27/89 (713)
TYPEOR PRINT NAME R.D. Osterhout		TELEPHONE NO. 546-4774
This space for State Use) Try Enthur The State Use of t	medistrice superve	DATE 5-3-89
CONDITIONS OF AFFROVAL F ANY 11 OF 1/24/10 6/10	will be given vatil >	ihis NSL has