

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☐

DEEPEN ☒

PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☒

GAS
WELL ☐

OTHER

SINGLE
ZONE

RECEIVED
MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Hondo Oil & Gas Company

3. ADDRESS OF OPERATOR

P. O. Box 2208, Roswell, NM 88202

MAR 16 '89

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface

660' FSL & 660' FWL

At proposed prod. zone

O. C. D.

ARTESIA, OFFICE

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

9 miles northeast of Loco Hills, NM

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(Also to nearest drlg. unit line, if any)

660'

16. NO. OF ACRES IN LEASE

1919.88

17. NO. OF ACRES ASSIGNED

TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

1320'

19. PROPOSED DEPTH

3917'

20. ROTARY OR CABLE TOOLS

Rotary from 3802-3917'

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3889' GR

22. APPROX. DATE WORK WILL START*

3/20/89

23. EXISTING ~~PROPOSED~~ CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4"	10 3/4"	32.75#	734'	100 sx.
7 7/8"	5 1/2"	15.5#	3801'	125 sx.

We propose to deepen this well from a TD of 3801' to a new TD of 3917'. New perforations are to be added as follows:

(1) 3576-3784' (1 JSPF) - 32 holes

(2) 3294-3511' (1 JSPF) - 38 holes

The lower San Andres will be left open hole to produce.

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. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

Risa Bohannon

TITLE Engineering Technician

DATE 3/13/89

(This space for Federal or State office use)

PERMIT NO. _____

APPROVAL DATE _____

APPROVED BY _____

TITLE _____

DATE 3-15-89

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side