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NEW MEXICO OIL CONSERVATION COMMISSION

30-015-22411  
Form C-101  
Revised 1-1-65

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MAR 02 1981

LAND OFFICE

5A. Indicate Type of Lease  
STATE  FEE

5. State Oil & Gas Lease No.  
L-6655

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Form of Lease Name STATE CY COM	
2. Name of Operator Cities Service Company		9. Well No. 1	
3. Address of Operator Box 1919, Midland, TX 79702		10. Field and Pool, or Wellfoot Und. Bone Springs	
4. Location of Well UNIT LETTER <u>H</u> LOCATED <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>26</u> TWP. <u>19S</u> RSE. <u>28E</u> NMPM		12. County Eddy	
19. Proposed Depth P.B.T.D. 9050		19A. Formation Bone Springs	
21. Elevations (Show whether D.P., K1, etc.) 3362.8' GR		21A. Kind & Status Plug. Bond Required/Approved	
21B. Drilling Contractor N/A		22. Approx. Date Work will start March 2, 1981	

23. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
(SEE MORROW COMPLETION DATA)					

O.T.D. 11,375' O.P.B.T.D. 10,665'. It is proposed to plug back and test the Bone Springs formation in the following manner:

Set a CIBP @ 9650' & dump 50' of cement on top to plug off the Canyon Perfs 9680 - 9956'. Set a CIBP @ 9100' & dump 50' of cement on top to plug off Wolfcamp Perfs 9133 - 9167'. Perforate the Bone Springs w/2 shots @ 7739'. Run tubing w/RTTS tool & test Bone Springs naturally. If found uneconomical, squeeze perfs @ 7739 & reperforate the Bone Springs w/2 SPF @ 7734, 7735, 7736, 7737, 7738, & 7739'. Test natural & if necessary acidize w/2000 Gals of 15% HCl acid. Retest & if economical, take completion tests and put on production.

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.

Signed [Signature] Title Region Oper. Mgr. Date 2/27/81

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE MAR 04 1981

CONDITIONS OF APPROVAL, IF ANY: