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UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

30-634 20172

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 MULTIPLE ZONE

2. NAME OF OPERATOR
 W. E. Florence

3. ADDRESS OF OPERATOR
 Box 1878, Farmington New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)
 At surface
 Block 2- Sec 20 T27 N1E
 At proposed prod. zone
 Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 20 miles south of Dulce, New Mexico

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)
 500/N 2140/E

16. NO. OF ACRES IN LEASE
 2030.08

17. NO. OF ACRES ASSIGNED TO THIS WELL
 320 / 109

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
 None

19. PROPOSED DEPTH
 7200' *Testing*

20. ROTARY OR CABLE TOOLS
 Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
 7534.0

22. APPROX. DATE WORK WILL START*
 11/1/68

5. LEASE DESIGNATION AND SERIAL NO.
 Jicarilla 408

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
 Jicarilla apache

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
 Florence 1 Jic. 408

9. WELL NO.
 Florence 1

10. FIELD AND POOL, OR WILDCAT
~~Jicarilla 408~~

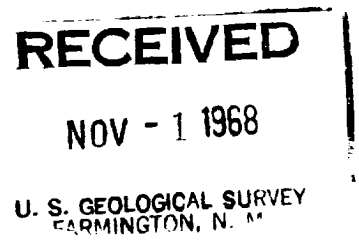
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 Sec 20 T27 N1E

12. COUNTY OR PARISH
 Rio Arriba

13. STATE
 New Mex.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12	5/8	24	300'	300 sack
7 7/8	5 1/2	11.40	7100'	50 sack



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 W. E. Florence TITLE Operator DATE 11/1/68

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: