HPI#30-025-07054

					¥ ¥	HPL #30.	025-0	7054	
Form 3160-3 (November 1983) (formerly 9-331C)	mber 1983) (Other instructions on Budget Bureau No. 1004-0136								
BUREAU OF LAND MANAGEMENT						NM-836	28		
——————————————————————————————————————	N FOR PERMIT T	O DRILL, I	DEEPE	N, OR PLUG	BACK	6. IF INDIAN, ALL	OTTES OR TRI	BE NAME	
						7. UNIT AGREEMENT NAME			
OIL CAR GAR ULL OTHER RE-ENTRY SINGLE DULTIPLE CONE						8. FARM OR LEAS			
C. W. TRAINER						9. WELL NO.	Fed.		
3. ADDRESS OF OPERATOR						1			
P.O. Box 755 Hobbs, New Mexico 88240 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*) At surface						10. FIELD AND POOL, OR WILDCAT Hand. Sawyer Dev. 11. SBC., T., B., M., OR BLE.			
1980' FSL & 660' FWL At proposed prod. zone						AND SURVEY OR AREA			
Same 14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE [®]						Sec. 7-T9S-R38E			
16 miles East of Crossroads, New Mexico						Lea		Mex	
15. DISTANCE FROM PROPO LOCATION TO NEAREST PROPERTY OF LEASE L	OF ACRES IN LEASE	17. NO. C TO T	OF ACRES ASSIGNED THIS WELL 40						
(Also to nearest drig, unit line, if any) 11.55.00 18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, 19. PROPOSED DEPTH 20.						OTARY OR CABLE TOOLS			
OR APPLIED FOR, ON THIS LEASE, FT. Vertical 11,689'						lorkover Rig			
21. ELEVATIONS (Show whether DF, RT, GR, etc.) 3987' DF						22. APPROX. DATE WORK WILL START* On Approval			
23.	P	ROPOSED CASU	G AND	CEMENTING PROGR			LUVAL	<u></u>	
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER F		SETTING DEPTH		QUANTITY OF C			
17 1/2"	13 3/8	36#		372'	400				
12 1/4"	9 5/8	36# & 4	0#	י4237	200	0 sx. Circl.			
8 3/4" 6 3/4"	6 3/4" 5 1/2 17# & 20# 11,689 60						5 sx. Slo-Set. 0 sx 1st stage DV @ 10321' 00 sx 2nd stage Toc - 5660 '		
5650' of 5	5 1/2 casing pul	led during	plug	ging, May 1961					
casing to Formation. of wellbor commercial	riginal well dr	ean out to be pressure be perfora illed by Wa	o PB e tes ated, arren	ID of 11,645 ted after spl: acidized and	and t icing to tested	est the De insure inf for product GENERA Fed. SPECIAL ATTACH	evonian tegrity AL SUBJEC L REQUIR STIPULA	EMENTS A	
BOP Progra	m: See attache	d copy of I	BOP D	iagram. BOP i	nstalle	d & tested I	Daily.		
IN ABOVE SPACE DESCRIBE zone. If proposal is to d preventer program, if any	PROPOSED PROGRAM : If p rill or deepen directional	roposal is to deep	en or pl	ug back, give data on j	present prod	uctive sone and pro	posed new p	roductive • blowout	
24. BIGNED A.E.	Jen de	TIT	L E	Agent (50)	2-622-7	355° date	2-2-90		
(This space for Feder	al or State office use)		. <u></u>	<u></u>		<u></u>			
PERMIT NO.				APPROVAL DATE					
CTUDE CARLSSAD RESOUNCE AREA						DATE 3-13 90			
CONDITIONS OF APPROVA	L, IF ANT :								

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MAR 14 1990 OCD MOBBS OFFICE

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