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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

Orig & 3cc: OCC, Hobbs
cc: Southern Region (West Texas)
cc: file

5A. Indicate Type of Lease
STATE FEE

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Barnes & Golden
2. Name of Operator SINCLAIR OIL CORPORATION		9. Well No. 2
3. Address of Operator P. C. Box 1920, Hobbs, New Mexico 88240		10. Field and Pool, or Wildcat Bronco
4. Location of Well UNIT LETTER <u>K</u> LOCATED <u>2310</u> FEET FROM THE <u>West</u> LINE AND <u>1650</u> FEET FROM THE <u>South</u> LINE OF SEC. <u>11</u> TWP. <u>13S</u> RGE. <u>38E</u> NMPM		12. County Lea
19. Proposed Depth 11,860'		19A. Formation Devonian
20. Rotary or C.T. Rotary		
21. Elevations (Show whether DF, RT, etc.) 3800' GR	21A. Kind & Status Plug. Bond In Effect	21B. Drilling Contractor Lovington Rental Tools & Supplies, Inc. Upon Appr.

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
5-5/8"	No liner				

7"OD casing set @ 11,792'.

Well presently completed as dual oil well in Mississippian perms. 11,096-11,116' and Devonian perms. 11,786-11,792' and Open Hole 11,792-11,800'. TD 11,800'. PBD 11,800'.

PROPOSE TO: Squeeze cement Mississippian perms. 11,096-11,116', drill out and test squeeze. Drill Model D packer @ 11,700' and deepen from 11,800' to 11,860' in Devonian. Acidize Devonian perms. 11,786-92' and open hole 11,792-11,860' w/approx. 2000 gals. 15% NE acid in 2 stages using 500# rock salt between stages. Swab test.

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 Superintendent Date 3-3-69

(This space for State Use)

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY.