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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

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		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> PLUG BACK <input type="checkbox"/> 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 Elliott	
2. Name of Operator Carter Foundation Production Company		9. Well No. 5	
3. Address of Operator P. O. Box 900, Kermit, Texas 79745		10. Field and Pool, or Wildcat Drinkard	
4. Location of Well UNIT LETTER D LOCATED 330 FEET FROM THE North LINE AND 990 FEET FROM THE West LINE OF SEC. 22 TWP. 22-S RGE. 37-E NMPM		12. County Lea	
19. Proposed Depth 7320'		19A. Formation Silurian-Montoya	20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) 3388' D.F.	21A. Kind & Status Plug. Bond Blanket on File	21B. Drilling Contractor Unknown	22. Approx. Date Work will start As soon as possible

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
6-1/4"	5"	14#	7320'	150	5032'

Proposed Workover Procedure:

Squeeze off perforations 6399-6422' with 100 sacks cement mixed with appropriate additives. Drill out cement with reverse circulation unit using 6-1/4" bit and deepen to 7320'. Run Gamma Ray-Neutron or Sonic Log from base of 7" casing to total depth. Perforate opposite Silurian-Montoya section at selected intervals based on sample analysis and log data. Run tubing and packer and acidize perforations with 15% regular acid using ball sealers to ball out perforations. Amount of acid to be determined by number of required perforations.

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 Robert D. Stelling Title Agent Date 11-18-76
(This space for State Use)

APPROVED BY _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

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NOV 18 1975

OIL CONSERVATION COMM.
HOBBS, N. M.