

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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
Continental Oil Company

3. ADDRESS OF OPERATOR
Box 460, Hobbs, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
At surface 1980' FSL & 1980' FWL of Sec. 26, T-23S, R-36E,
Lea County, New Mexico, NMPM
At proposed prod. zone Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
Approximately 10 miles SW/ of Eunice, New Mexico

10. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)
1980' FNL & 1980' FWL of Sec. 26

16. NO. OF ACRES IN LEASE
800

17. NO. OF ACRES ASSIGNED TO THIS WELL
40

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
330' So. & 990' West of Lynn B-1 No. 1

19. PROPOSED DEPTH
3,725'

20. ROTARY OR CABLE TOOLS
Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
3376 DF (Est)

22. APPROX. DATE WORK WILL START*
1-25-65

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11"	7 5/8"	24	300'	150 circ
6-3/4"	4 1/2"	9.5	3,725'	225 fill to 2,800'

It is proposed to drill a well at the above location and complete in the Queen formation. The well will be drilled and completed according to USGS requirements.

Your approval to drill the above well, and to produce it upon completion is requested.

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: ROBERT CAULT III TITLE Staff Supervisor DATE 1-18-65

(This space for Federal or State office use)

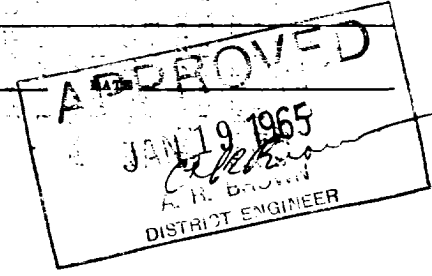
PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

USGS-5, NMOCC-2, JM PAN AM HOBBS-3 ATL ROS-2 CALIF MID-2

*See Instructions On Reverse Side



5. LEASE DESIGNATION AND SERIAL NO.
LC 030139 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
NMFU

8. FARM OR LEASE NAME
Lynn B-1

9. WELL NO.
11

10. FIELD AND POOL, OR WILDCAT
Langlie Mattix

11. SEC. T. R. M., OR BLK. AND SURVEY OR AREA
Sec. 26-23-36

12. COUNTY OR PARISH
Lea

13. STATE
New Mexico