

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY(Other instructions
reverse side)

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐GAS
WELL ☒SINGLE
ZONE ☒MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Box 68, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

2080' FNL & 760 FEL, Sec. 33

At proposed prod. zone (Unit H, SE/4 NE/4)

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

13.6 miles south west of Artesia, NM

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

16. NO. OF ACRES IN LEASE

19. PROPOSED DEPTH

9850

17. NO. OF ACRES ASSIGNED
TO THIS WELL

320

20. ROTARY OR CABLE TOOLS

Rotary

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

3482.48 GR

22. APPROX. DATE WORK WILL START*

8-15-79

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11" or 12-1/4"	8-5/8"	24#	2100'	Circ to Surf
7-7/8"	5-1/2"	17,20,&23#	9850'	Tie back to 8-5/8"

Propose to drill and equip well in the Morrow formation. After reaching TD logs will be run and evaluated; perforate and/or stimulate as necessary in attempting commercial production.

Mud Program: 0 - 2100' Native mud and fresh water
1800' - 8900' Native mud and fresh water add brine by Wolfcamp depth
8900' - TD Commercial mud and cut brine w/KCL for 6% system.
Raise viscosity prior to Morrow penetration.

Archaeological Survey Attached
BOP Program Attached
Gas is not dedicated

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

Ray Cox

TITLE

Admin. Supervisor

DATE

9-4 -79

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

0+5-USGS,A; 1-Hou; 1-Susp; 1-BD; 1-ARCO