

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

30-015-25156

LC 000001

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
 Tom R. Minihan Joe L. Tanver

3. ADDRESS OF OPERATOR
 763 Hobbs, N.M. 88040
 P.O. Box 4364 Midland, TX. 79704

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
 At surface 330 FNL & 1661 FEL
 At proposed prod. zone Grayburg

5. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
 To follow

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

9. WELL NO.
 45

10. FIELD AND POOL, OR WILDCAT
 RED LAKE (GRAYBURG)

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
 35, T-17, Range 27 E

12. COUNTY OR PARISH
 Eddy

13. STATE
 New Mexico

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)
 N/A

16. DISTANCE FROM PROPOSED* LOCATION TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
 N/A

17. NO. OF ACRES IN LEASE
 80

18. PROPOSED DEPTH
 1850'

19. NO. OF ACRES ASSIGNED TO THIS WELL
 10

20. ROTARY OR CABLE TOOLS
 Rotary

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

22. APPROX. DATE WORK WILL START*
 January 1983

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4	8 5/8	24#	450	350 SX
7 7/8	4 1/2	9.5#	1850	465 SX

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.

SIGNED Tom R. Minihan TITLE Owner & Operator DATE 12/21/82

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY [Signature] TITLE _____ DATE 10-5-82

CONDITIONS OF APPROVAL, IF ANY: