

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT PRINTING
OFFICE & NUMBER
OF COPIES REQUIRED
(Other instructions on
reverse side)

30-015-26572
BLM Roswell District
Modified Form No.
MD60-3160-2

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

Socorro Petroleum Company

3a. Acre Code & Phone No.

505/677-2360

3. ADDRESS OF OPERATOR

P. O. Box 38, Loco Hills, NM 88255

RECEIVED

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

At surface

2130' FSL & 1980' FEL

DEC 5 '90

At proposed prod. zone

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

9-1/2 miles northeast of Loco Hills, NM, NATESIA, OFFICE

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

1980'

16. NO. OF ACRES IN LEASE

1919.88

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

1170'

19. PROPOSED DEPTH

4000'

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

20. ROTARY OR CABLE TOOLS

Rotary

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

3902' GR

22. APPROX. DATE WORK WILL START*

11/1/90

PROPOSED CASING AND CEMENTING PROGRAM

HOLE SIZE	CASING SIZE	WEIGHT/FOOT	GRADE	THREAD TYPE	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4"	8-5/8"	24#	J-55	8 R CIRCULATE	560'	300 sx. Cl. C
7-7/8"	5-1/2"	15.5#	J-55	8 R	4000'	200 sx. Cl. C + 1000 sx. Lite

Mud Program:

0 - 560' Drill with fresh water.
560 - 4000' Drill with saturated brine.

BOP Program:

Will install on 8-5/8" surface casing a 10" Series 900 Type "E"
Shaffer Double Hydraulic BOP and will test before drilling into the
Queen Formation.

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 John D. Gail TITLE Manager DATE 10/12/90

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE 12-4-90

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL SUBJECT TO

GENERAL REQUIREMENTS AND

SPECIAL STIPULATIONS

*See Instructions On Reverse Side