NO. OF COPIES RECEIVED	7			R	FFF	1 1 4 5-	,						
DISTRIBUTION		_	NEW MEXICO OIL CONSERVANTOR SPRINGERS						form C-191 Revised 1-1-55				
SANTAFE	-		ina: s. c							Type of Lease			
FILE ,	/ 	JAN 3 9 1979							STATE				
U.S.G.S.			5. State Oil & Gas Lease No.										
L													
MAZ TARA TARA													
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK										eement Name			
la. Type of Work				_					7. Citat 1:91				
b. Type of Well			DEEPEN PLUG BACK						8. Farm or Lease Name				
OIL X GAS WELL	Convert to injectionzone MULTIPLE ZONE						Artesia Metex Unit						
2. Name of Operator													
Yates Drilling Company										10. Field and Pool, or Wildcat			
3. Address of Operator													
207 So. 4th Street, Artesia, NM 88210										Artesia			
4. Location of Well UNIT LETTER M LOCATED 660 FEET FROM THE West LINE													
AND 660 FEET FROM THE SOUTH LINE OF SEC. 25 TWP. 185 RGE. 27E NMPM													
AND 660 FEET FROM THE SOUTH LINE OF SEC. 25 TWP. 185 RGE. 215 NMPM 12. County													
(1)													
	7777	77777	777777	<i>HHH</i>	////// //////////////////////////////	Proposed D	enth 19	A. Formatio	<u>, , , , , , , , , , , , , , , , , , , </u>	20. Rotary or C.T.			
					11111	2020	/0,5			Reverse Unit			
21. Elevations (Show whether I	DF. RT	r, etc.)	21A. Kind	& Status Plu	ig. Bond 21	B. Drilling (Contractor		22. Appro	ox. Date Work will start			
3550		Blanket						Wh€	n approved				
23. PROPOSED CASING AND CEMENT PROGRAM													
SIZE OF HOLE	SIZE OF HOLE SI				PER FOOT					EST. TOP			
		8-5/8		24# /0, 5		415		50 200		/300			
		4-1	4-1/2			2020		200					
	j			1	Į		I						
Propose to:													
Clean out to T.D. 2020 - Set $4-1/2$ at 2020 with 200 sx. cement.													
Perf. Metex z	one	s from	1920 -	2000' a	cidize ·	- set 2'	cmt. 1	ined tu	bing at	1800' on			
									,				
tension pkr Put well on injection.													
To set the Assessment													
To see "													
										•			
					assess	0 BLUC BACK	CIVE DATA O	: DOFSENT P	RODUCTIVE Z	ONE AND PROPOSED NEW PRODUC			
IN ABOVE SPACE DESCRIBE TIVE ZONE. GIVE BLOWOUT PREV	PRO	POSED PR	IF ANY.	PROPOSAL IS	TO DEEPEN O	H PLUG BACK,	GIVE DATA OF						
I hereby certify that the information above is true and complete to the best of my knowledge and belief.													
6. Allen				Title	Drilli	na Supe	rvisor		Date	1-29-79			
Signed 57 w						ng buss							
(This space for State Use) SUPERVISUR, DISTRICT II										JAN 3 1 1979			
APPROVED BY W. C. Suesset TITLE SUPERVISOR, DISTRICT LI DATE													
APPROVED BY 60 100		ANY:		!!!	<i>a</i> .	ر ریسر							
conditions of approval. If any: Lestject to Santa Fe approval ? WFX													
surger				Surger with									