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NEW MEXICO OIL CONSERVATION COMMISSION
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JUL 19 1977

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Len Mayers	
2. Name of Operator Yates Petroleum Corporation		9. Well No. 1	
3. Address of Operator 207 S. 4th Street, Artesia, NM 88210		10. Field and Pool, or Wildcat und. Perm. 34 Wells - Atoka Perm Gas	
4. Location of Well UNIT LETTER D LOCATED 990 FEET FROM THE North LINE AND 990 FEET FROM THE West LINE OF SEC. 28 TWP. 18S RGE. 26E NMPM		12. County Eddy	
19. Proposed Depth 3000'		19A. Formation Atoka Perm	
20. Rotary or C.T.			
21. Elevations (Show whether DF, RT, etc.) GL 3421		21A. Kind & Status Plug. Bond Perforated	
21B. Drilling Contractor Wilson Well Servicing		22. Approx. Date Work will start 7/20/77	

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8 5/8	24.0	1230'		Surface
7 7/8"	5 1/2	15.5	3000'	450	Surface
7 7/8"			3100'	* 25 35	3000'
7 7/8"			4556'	25 35	4456'
7 7/8"			5930'	25 35	5830'
7 7/8"			6600'	25 35	6500'
7 7/8"	5 1/2	17.0	9200'	90	8925'

Perm Exp 9009 7/17/77

We propose to plug the well and salvage recoverable pipe. Each strata will be segregated from all other stratas using mud-laden fluid and cement plugs. A new string of 5 1/2", 15.5# casing will be set at \pm 3000'. The Yeso SA interval will be perforated, logged, and sand frac'd.

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. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed *Jim Morgan* Title Production Sup't Date 7/18/77
(This space for State Use)

PROVED BY *W.A. Gessett* TITLE SUPERVISOR, DISTRICT II DATE JUL 19 1977

CONDITIONS OF APPROVAL, IF ANY:

** as noted above*