

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-025604	
b. TYPE OF WELL OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR Amoco Production Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR BOX 63, NOBBS, N. M. 88240		8. FARM OR LEASE NAME MALCO G. Federal	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)* At surface 2301' FNL x 330' FEL Sec. 9 (Unit H, SE 1/4 NW 1/4)		9. WELL NO. 15	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*		10. FIELD AND POOL OR WILDCAT EMPIRE Abo	
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 9-18-27- NM PM	
16. NO. OF ACRES IN LEASE		12. COUNTY OR PARISH	
17. NO. OF ACRES ASSIGNED TO THIS WELL 40		13. STATE N.M.	
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.		20. ROTARY OR CABLE TOOLS Rotary	
21. ELEVATIONS (Show whether DF, RT, GR, etc.)		22. APPROX. DATE WORK WILL START* 11-20-71	

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4" - 11"	8 5/8	24#	1000'	Circulate
7 7/8"	4 1/2	9.5	5700'	Full 600' Above Abo

After drilling well logs will be run and evaluations made, perforating and/or stimulating as necessary in attempting commercial production

OCT 26 1971

D. C. C.
ARTESIA, OFFICE

REPLACEMENT WELL - FOR WELL No. 5

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

TITLE AREA SUPERINTENDENT

DATE OCT 18 1971

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

DECLARED WATER BASIN

APPROVED BY

TITLE

CEMENT BEHIND THE CASING MUST BE CIRCULATED

CONDITIONS OF APPROVAL

TITLE

NOTIFY USGS IN SUFFICIENT TIME TO
WITNESS CEMENTING THE CASING.APPROVED
OCT 23 1971
R. L. BEEKMAN
ACTING DISTRICT ENGINEERSee Instructions On Reverse Side
APPROVAL IS RESCINDED IF OPERATIONS
ARE COMMENCED WITHIN 3 MONTHS.
EXPIRES JAN 22 1972OJ 4- USGS- H
1- ACJ
1- SUG
1- RLL
2- MONDO- ROSWICK

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form O-162
Supersedes O-128
Effective 11/65

All distances must be from the outer boundaries of the Section

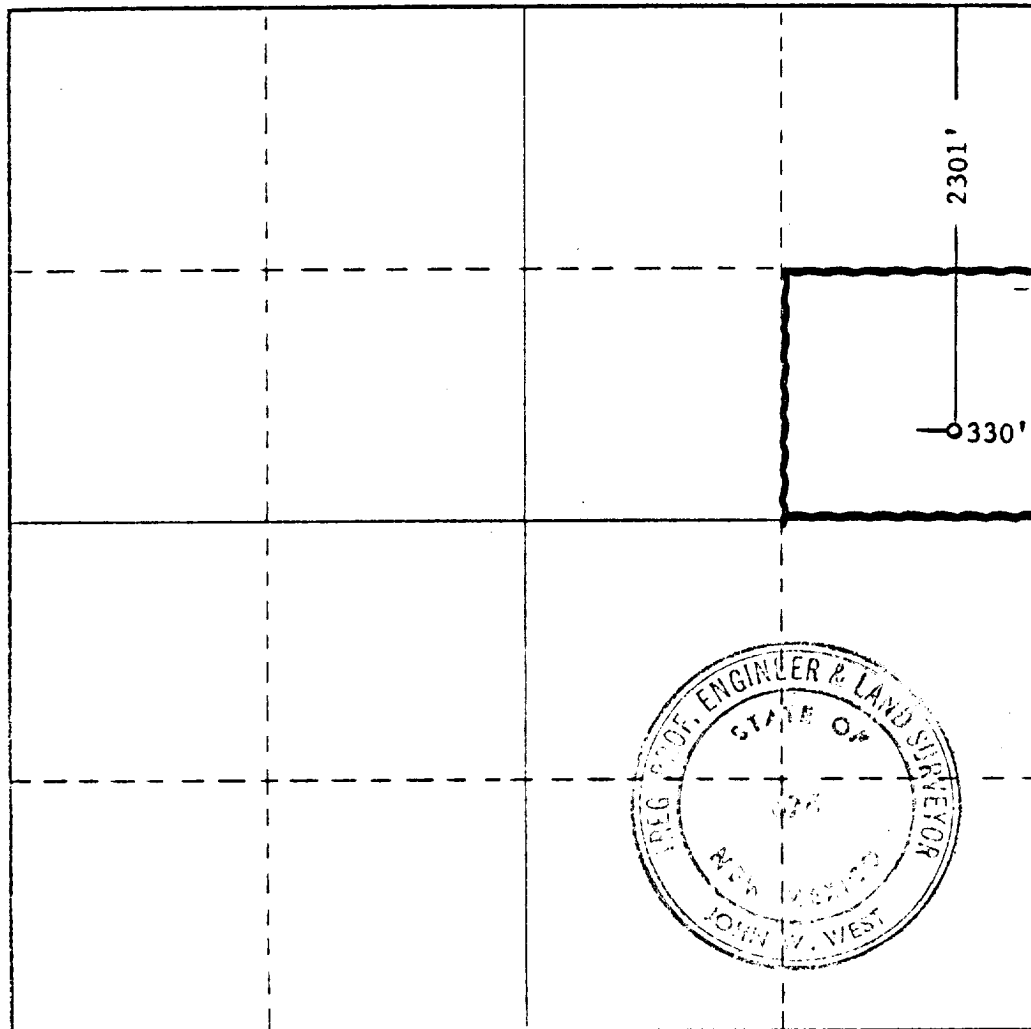
Owner AMOCO PRODUCTION COMPANY			Lease MALCO G FEDERAL		Well No. 15
Unit Letter H	Section 9	Township 18 SOUTH	Range 27 EAST	County EDDY	
Actual Footage Location of Well: 2301 feet from the NORTH line and 330 feet from the EAST line					
Ground Level Elev.	Producing Formation ABO		Pool EMPIRE ABO	Dedicated Acreage 40	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

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

Name _____

Position
AREA SUPERINTENDENT

Company _____

Amoco Production Company

Date _____

OCT 18 1971

I hereby certify that the well location shown on this plat is plotted from field notes of a duly surveyed and approved unit, and through some knowledge and belief of my best of my knowledge and belief.

Date Surveyed _____

10-12-1971

Registered Professional Engineer and/or Land Surveyor

John W. West
Certificate No. _____

676

330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600