

IL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501
RECEIVED BY
MAR 01 1984
O. C. D.
ARTESIA, OFFICE

Form C-101
Revised 10-1-78

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OPERATOR	☒

5A. Indicate Type of Lease
STATE ☒ FEE ☐
5. State Oil & Gas Lease No.
LG-4954

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work
b. Type of Well
OIL WELL ☒ GAS WELL ☐ OTHER ☐
SINGLE ZONE ☐ MULTIPLE ZONE ☐
2. Name of Operator
Yates Petroleum Corporation
3. Address of Operator
207 S. 4th, Artesia, New Mexico 88210
4. Location of Well
UNIT LETTER 0 LOCATED 660 FEET FROM THE South LINE
AND 1980 FEET FROM THE East LINE OF SEC. 16 TWP. 18S RGE. 25E NMPM
17. County
Eddy
7. Unit Agreement Name
8. Farm or Lease Name
4 Dinkus "GV" State
9. Well No.
1
10. Field and Pool, or Wildcat
Penasco Draw/Yeso/SA
19. Proposed Depth
2550'
19A. Formation
Yeso/SA
20. Rotary or C.T.
Rotary
21. Elevations (show whether DF, RT, etc.)
3551' GL
21A. Kind & Status Plug. Bond
Blanket
21B. Drilling Contractor
Undesignated
22. Approx. Date Work will start
ASAP

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
In place	13 3/8"	48"	appr. 380'	circ	
In place	8 5/8"	24"	1207'	circ	
	5 1/2"	15.5-17#	TD	250 sx	

We propose to drill out plugs and clean hole to 2550' Yeso formation. Cement will be pumped to casing. Formation will be perforated and stimulated for production.

MUD PROGRAM: Native mud to TD.

BOP PROGRAM: BOP's will be installed when needed.

Post. ID-1
2 1/2" Hook
3-10-84
ID-3
3-10-84
elig. Will hand

APPROVED FOR 180 DAYS
9-2-84
UNIT BEING UNDERWAY

4. 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.

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

signed Cy Cowan Title Regulatory Agent Date 3/1/84

(This space for State Use)

APPROVED BY W. M. Walker TITLE OIL AND GAS INSPECTOR DATE MAR 02 1984

CONDITIONS OF APPROVAL, IF ANY: