

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

CLSK
BLT
SL
OP

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

MAY 18 1993

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210
DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)

30-015-27448

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

VB-414

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☐

b. Type of Well:

OIL WELL ☐ GAS WELL ☒ OTHER ☐ SINGLE ZONE ☒ MULTIPLE ZONE ☐

2. Name of Operator

Nearburg Producing Company ✓

7. Lease Name or Unit Agreement Name

North Scoggin Draw State
14 State

3. Address of Operator

P. O. Box 823085, Dallas, TX 75382-3085

8. Well No.

1.

9. Pool name or Wildcat

Red Lake, East Upper Penn

4. Well Location

Unit Letter L : 660 Feet From The West Line and 1,980 Feet From The South Line

Section 14 Township 18 S Range 27 E NMPM Eddy County

10. Proposed Depth

8,300'

11. Formation

Canyon

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

3,475' GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

Peterson Drlg Co

16. Approx. Date Work will start

August 1, 1993

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	48#	370'	475	Circulate
12-1/4"	9-5/8"	36#	2,180'	1,200	Circulate
8-3/4"	7"	23# & 26#	8,300'	1,000	Tie back to 9-5/8"

Propose to drill the subject well to sufficient depth to evaluate the Canyon formation. After reaching TD, logs will be run and casing set if the well is productive. Perforate, test and stimulate as necessary to establish production.

BOP program is attached.

POH 10-1
5-11-93
ML & AE

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.

SIGNATURE E. Scott Kimbrough TITLE Mgr of Drlg & Prod DATE May 17, 1993

TYPE OR PRINT NAME E. Scott Kimbrough

TELEPHONE NO. 505-397-4186

(This space for State Use)

APPROVED BY Mark Kelley TITLE Asst DATE 5-18-93

CONDITIONS OF APPROVAL, IF ANY:

180 DAYS
11-18-93
UNDERWAY

NOT NEARLY SUFFICIENT
TIME TO GET ALL OF THE
132/8