

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

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

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II X
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)

5. Indicate Type of Lease
Fed ☐ STATE ☐ FEE ☐

6. State Oil & Gas Lease No.
14-0800018772

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

B & A Operating Co. ✓

7. Lease Name or Unit Agreement Name

Culwin Unit

8. Well No.
16

3. Address of Operator

P.O. Box 136, Lovington, N.M. 88260

9. Pool name or Wildcat

Shugart: Yates, 7R, Qn.

4. Well Location

Unit Letter G : 1980 Feet From The N Line and 1980 Feet From The E Line

Section 1 Township 19S Range 30E NMPM Eddy County

10. Proposed Depth
3130 T.D.

11. Formation
Yates, 7R

12. Rotary or C.T.

13. Elevations (Show whether DF, RT, GR, etc.)
3510 D.F.

14. Kind & Status Plug Bond

15. Drilling Contractor

16. Approx. Date Work will start

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

Fill and Seal (cap) 5½" casing to 2800 ft.

Run bond log and recement casing.

Perforate, acidize and test Seven Rivers and Yates Zones at 2524-2592 ft.
if O.K. fracture treat.

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 D. R. Bell TITLE Manager/Operations DATE 5-8-89

TYPE OR PRINT NAME D. R. Bell TELEPHONE NO. 396-3062

(This space for State Use)

APPROVED BY For Record Only TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: