

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

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

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

API NO. (assigned by OCD on New Wells)

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-9739

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 ☐

7. Lease Name or Unit Agreement Name

BBOC STATE

2. Name of Operator

MYCO INDUSTRIES INC

RECEIVED

8. Well No.

1

3. Address of Operator

207 SOUTH 4TH, ARTESIA, NM 88210

AUG 01 '89

9. Pool name or Wildcat

TURKEY TRACK SR-Q-G-SA

4. Well Location

Unit Letter

G

: 1980

Feet From The

NORTH

O. CLID and

1980

Feet From The

EAST

Line

Section 11

Township

19S

ARTESIA, OFFICE

Range 29E

NMPM

EDDY

County

10. Proposed Depth

2400

11. Formation

QUFEN

12. Rotary or C.T.

PULLING UNIT

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

3374 GR.

14. Kind & Status Plug. Bond

STATE CASH 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
17 1/2"	13 3/8"	54.5#	311	500SX "C"	CIR.
11"	8 5/8"	32#	2809	1700SX "C"	CIR.
7 7/8"	5 1/2"	15.5 + 17#	11640	1075 SX	2500

TD 11640

PBTD 11230

Propose to set a CIBP @ 11100 & cap w/35' cement to abandon

Morrow perfs 11132-11142 & 11204-11208

spot a 25 sx plug @ 9700 top of Penn

spot a 25 sx plug @ 9200 top of Wolfcamp

perf at 4250 & sq w/40 sx top of Bone Spring

cut & pull 5 1/2" @ 2500' +- spot 35 sx plug in & out of 5 1/2" stub

perf and complete in the Queen

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 2/2/90
UNLESS DRILLING UNDERWAY

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 W. A. Gressett TITLE Consultant

DATE 8/1/89

TYPE OR PRINT NAME W A Gressett

TELEPHONE NO 748-1471

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____

DATE

AUG 1 1989

CONDITIONS OF APPROVAL, IF ANY: