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NEW MEXICO OIL CONSERVATION **RECEIVED**

JUL 10 1980

O. C. D.

ARTESIA OFFICE

30-015-23409

Form C-101
Revised 1-1-78

SA, indicate type of location
STATE ☒ FILE ☐

SA, indicate type of location

E 1051

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"/>	
b. Type of Well		OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	
2. Name of Operator		Yates Petroleum Corporation ✓	
3. Address of Operator		207 South 4th Street, Artesia, New Mexico 88210	
4. Location of Well		UNIT LETTER G LOCATED 1980 FEET FROM THE North LINE	
AND 1980 FEET FROM THE East LINE OF SEC. 8 TWP. 19 RGE. 28		Eddy	
5. Proposed Depth		11,200'	
6a. Formation		Morrow	
6b. Rotary or C.L.		Rotary	
7. Elevations (Show whether P.B., K.L., etc.)		3544' GL	
8. Kind & Status Prop. Bond		Blanket	
9. Drilling Contractor		Capitan 14	
10. Approx. Date Work will start		ASAP	

23. 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#	approx. 400'	320	circulate
12 3/4" - 11"	8 5/8"	24#	approx. 2300'	750	circulate
7 7/8"	5 1/2" or 4 1/2"	17# or 11.6#	TD	550 sx	

Propose to drill and test the Morrow and intermediate horizons. Approximately 400' of surface casing will be set and cemented to surface. Approximately 2300' of intermediate casing will be set and cemented to surface. If commercial, will run 5 1/2" or 4 1/2" casing, perforate and stimulate as needed for production.

MUD PROGRAM: FW gel & LCM to 2150', FW to 6000', KCL water to 7200', flosal-driskpak type mud to total depth.

BOP's PROGRAM: BOP's and hydril will be installed on 8 5/8" casing and tested daily.

GAS ACREAGED NOT DEDICATED.

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED.

EXPIRES 10-11-80

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 FLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed [Signature] Title Regulatory Coordinator Date July 10, 1980
(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE JUL 11 1980

CONDITIONS OF APPROVAL, IF ANY: