## Submit to Appropriate District Office State Lease — 6 copies Fee Lease — 5 copies

## State of New Mexico Energy, Minerals and Natural Resources Department

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Form C-101	γ
Revised 1-1-89	

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

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

ОΠ	CONSER	VATION	NOIVISION
	A	VALIO	

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

Pl	NO. (assigned by OCD on New Wells) 30-015-23801	
5.	Indicate Type of Lease	FEE

6. State Oil & Gas Lease No.

DISTRICT III 1000 Rio Brazos Rd., Aztec	, NM 87410		CARRIAL OFFICE				
		O DRILL, DEEPEN, O	R PLUG BACK				
la Type of Work:	ION TOTT ETIMIT	0 011121		7. Lease Na	me or Unit Agr	reement Name	
DRILL	RE-ENTER	DEEPEN	PLUG BACK X				
b. Type of Well: OIL GAS WELL X WELL	OTHER RECOMPL	ETION SINGLE ZONE	MULTIPLE ZONE	Rio Pe	nasco KI	) Com	
2. Name of Operator				8. Well No.			
	UM CORPORATION	(505) 748	3-1471	3 .			
3. Address of Operator				9. Pool nam			
	St., Artesia,	NM 88210		Undes.	Canyon		
4 Maril Tanadian		rom The North	Line and 66	0 Feet	From The	East	Line
			0.5-	NMPM		Eddy C	ounty
Section 11	Towns	ship 19S Ran	ge 25E	MMPM **********************************	mmm		7/////
Section 11	Towns						
Section 11	Towns	10, Proposed Depth		I. Formation		12. Rotary or C.T.	
Section 11		10, Proposed Depth 936	)'	I. Formation Canyon		12. Rotary or C.T. Pulling Un	//////
Section 11  13. Elevations (Show whether		10. Proposed Depth 9360 14. Kind & Status Plug. Bond		I. Formation Canyon	16. Approx. D	12. Rotary or C.T. Pulling Un Date Work will start	//////
	r DF, RT, GR, etc.)	10. Proposed Depth 936 14. Kind & Status Plug. Bond Blanket	15. Drilling Contract	I. Formation Canyon tor	16. Approx. D	12. Rotary or C.T. Pulling Un	//////
13. Elevations (Show whether	r DF, RT, GR, etc.)	10. Proposed Depth 936 14. Kind & Status Plug. Bond Blanket	15. Drilling Contract	I. Formation Canyon tor	16. Approx. E When a	12. Rotary or C.T. Pulling Un Date Work will start approved	it.
13. Elevations (Show whether 3416 ' GR 17.	or DF, RT, GR, etc.)	10. Proposed Depth 9360 14. Kind & Status Plug. Bond Blanket ROPOSED CASING AN	15. Drilling Contract	I. Formation Canyon tor	16. Approx. E When a	12. Rotary or C.T. Pulling Un Date Work will start approved  EST. TOI	it.
13. Elevations (Show whethere 3416 'GR 17.  SIZE OF HOLE	PF SIZE OF CASING	10. Proposed Depth 936 14. Kind & Status Plug. Bond Blanket	15. Drilling Contract  TD CEMENT PRO	I. Formation Canyon tor	When a	12. Rotary or C.T. Pulling Un Date Work will start approved  EST. TOI ace)	it.
13. Elevations (Show whethere 3416   GR   17.  SIZE OF HOLE   17½"	PF SIZE OF CASING 13-3/8"	10. Proposed Depth 9360 14. Kind & Status Plug. Bond Blanket ROPOSED CASING AN WEIGHT PER FOOT	15. Drilling Contract  ID CEMENT PROSETTING DEPTH	GRAM  SACKS OF	When a CEMENT (in place) (in place)	12. Rotary or C.T. Pulling Un Date Work will start approved  EST. TOI ace)	it.
13. Elevations (Show whethere 3416 'GR 17.  SIZE OF HOLE	PF SIZE OF CASING	10. Proposed Depth 9360 14. Kind & Status Plug. Bond Blanket ROPOSED CASING AN WEIGHT PER FOOT 54.5#	15. Drilling Contract  16. D CEMENT PROPERTY OF THE PROPERTY OF TH	GRAM SACKS OF	When a CEMENT (in place)	12. Rotary or C.T. Pulling Un Date Work will start approved  EST. TOI ace)	it.

Well completed in Strawn perforations 8230-8246'. Propose to recomplete well as follows: Set CIBP about 8200' and cap w/35' cement. Perforate Canyon Dolomite 7662-99' (5 holes); 7780-99' (6 holes); 7804-12' (4 holes). Stimulate with 6000 gals 20% NEFE acid in 3 stages. Swab back and evaluate recovery. If commercial recovery indicated, will consider installing sub-pump or rods and pump. If perforations 7662-7812' are all water or non-commercial, POOH and set CIBP about 7645', perforate Canyon Lime 7600-25' (12 holes). Will stimulate perforations 7600-25' w/2000 gals 15% NEFE.

APPROVAL VALID FOR PERMIT EXPIRES 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. rify that the information above is true and complete to the best of my knowledge and belief. 12-12-89 Production Supervisor DATE . TITLE -SKINATURE TELEPHIONE NO. TYPE OR PRINT NAME ORIGINAL SIGNED BY (This space for State Use) DEC 1 3 1989 MIKE WILLMANS APTROVED BY

CONDITIONS OF AFFROVAL, IF, ANY: