

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

State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED

FEB - 5 1992

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
P.O. Drawer DD, Artesia, NM 88210

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

APPROVAL NO. (Assigned by OCD on New Wells)
30-015-23801

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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 RECOMPLETION ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. Name of Operator
YATES PETROLEUM CORPORATION / (505) 748-1471

3. Address of Operator
105 South 4th St., Artesia, NM 88210

7. Lease Name or Unit Agreement Name
Rio Penasco KD Com

8. Well No.
3

9. Pool name or Wildcat
Undes. Canyon

4. Well Location
Unit Letter A : 990 Feet From The North Line and 660 Feet From The East Line

Section 11 Township 19S Range 25E NMPM Eddy County

10. Proposed Depth
9360'

11. Formation
Canyon

12. Rotary or C.T.
Pulling Unit

13. Elevations (Show whether DF, RT, GR, etc.)
3416' GR

14. Kind & Status Plug. Bond
Blanket

15. Drilling Contractor
-

16. Approx. Date Work will start
When approved

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#	412'	400 sx (in place)	
12 1/2"	8-5/8"	24#	1316'	650 sx (in place)	
7-7/8"	5 1/2"	15.5# & 17#	9360'	575 sx (in place)	

Well presently completed in Strawn perforations 8230-8246'. Propose to recomplate well as follows: Set CIBP \pm 8200' and cover w/35' cement. Perforate Canyon 7600-7625' and stimulate with 2000 gals 15% NEFE. Swab/test well and produced to obtain production test. If zone is non-commercial, will move RBP below 7900, test and pull packer. Perforate 7662-7812' and stimulate with 3000 gals 15% NEFE. Flow back and swab test. If fluid flow is substantial, evaluate possibility of running a sub pump and return well to production.

APPROVAL VALID FOR 180 DAYS
FEB 15 1992
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 [Signature] TITLE Production Supervisor DATE 2-3-92

TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

FEB 17 1992

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: