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O. C. D.

ARTESIA OFFICE

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. Type of Well

OIL WELL ☐

GAS WELL ☒

OTHER

SINGLE ZONE ☐

MULTIPLE ZONE ☐

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. 16 TWP. 19s RCT. 28e NADPM

7. Unit Agreement Name

8. Farm or Lease Name

Millman SB State

9. Well No.

1

10. Field and Pool, or Wildcat

17. County

Eddy

21. Elevations (show whether DF, KI, etc.)

3479 GL

21A. Kind & Status Plug. Bond

Blanket

19. Proposed Depth

11210'

19A. Formation

Morrow

20. Rotary or C.T.

Rotary

21B. Drilling Contractor

Ard Rio #6

22. Approx. Date Work will start

ASAP

Lease expiring

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. 450'	400 sx. circulate	
11" (12 1/4")	8 5/8"	24#	Approx. 2500'	800 sx. circulate	
7 7/8"	5 1/2" or 4 1/2"	15.5 - 17# or 10.5 - 11.6#		600 sx.	

Propose to drill and test the Morrow and intermediate formations. Approximately 450' of surface casing will be set and cemented to surface and intermediate casing will be set in top of the San Andres, cement to cover the Queen. If commercial, will run 5 1/2" or 4 1/2" casing, perforate and stimulate as needed for production.

MUD PROGRAM: FW gel and LCM to 2500', FW to 6050', KCL water to 8400', flosal-drispak type mud to TD.

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

GAS ACREAGE NOT DEDICATED.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 5-24-82
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.

Signed [Signature] Title Regulatory Manager Date 11-16-81

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE NOV 24 1981

CONDITIONS OF APPROVAL, IF ANY: