Reference BY (November 1983) SEP 18 985

UNITED STATES EPARTMENT OF THE INTERIOR

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved. Budget Bureau No. 1004-0136 Expires August 31, 1985

5.	LEASE	DBBIGNATION	AND	SERIAL
		0.0057		

١.	LEASE	DBBIGNATION	AND	BEBIAL	N
	NM.	-26057			

- D		_				·
ARRICATION F	OR PERMIT	TO DRILL	, DEEPEN,	OR PLUG	BACK	6. IF INDIAN, ALLOTTER OR TRIBE NAME
TOP K					_	7 DATE ACREMENT NAME

BUREAU OF LAND MANAGEMENT

APRILICABILE N FERMIT TO	J DRILL, DELLE	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				
DRILL X	DEEPEN		G BACK		7. UNIT AGREEMENT NA	MB
b. TYPE OF WELL OIL GAS X OTHER		NGLE X	MULTIPLE ZONE		8. FARM OR LEASE NAM	
2. NAME OF OPERATOR EXXON Corporation	atter me	the Kn	plug		Altwein "B" 9. WELL NO.	rederal Com
3. ADDRESS OF OPERATOR Box 1600, Midland, Texas					10. FIELD AND POOL, OF Undesig. And	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*) At surface 660' FSL and 1980' FWL of Sec. 12 (NW SE) At proposed prod. sone					(Mörrow. 11. SBC., T., B., M., OR B AND SURVEY OF ARI Sec. 12-T19	LK.
14. DISTANCE IN MILES AND DIRECTION FROM NEAR	ST TOWN OR POST OFFICE	•		-	12. COUNTY OR PARISH	
9 miles SW of Artesia					Eddy	New Mexico
15. DISTANCE FROM PROPUSED* LOCATION TO NEARRST PROPERTY OR LEASE LINE, FT. (Also to nearest drig, unit line, if any)		320		TO TH	ACRES ASSIGNED 18 WELL 320	
18. DISTANCE FROM PROPOSED LOCATIONS	1	8800	2	O. ROTAR	Rotary	
21. ELEVATIONS (Show whether DF, RT, GR, etc.) 3887 GR					Upon Approv	_
	PODOSED CASING ANI	CEMENTING	PROGRAM			

SIZE OF HOLE	BIZE OF CABING	WEIGHT PER FOOT	BETTING DEPTH	QUANTITY OF CEMENT
17 1/2"	13 3/8"	54.5#	300'	Surface
12 1/4"	8 5/8"	24.0#	1700'	Surface
7 7/8"	5''	21.4#	8800'	TOC @ 5500'

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive sone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

preventer program, if any.		
BIGNED MCCha, triplen	Unit Head	Sept. 12, 1985
(This space for Federal or State office use)		
PERNIT NO. OTTO STATE OF THE PERSON OF THE P	APPROVAL DATE	DATE 9-17-85
APPROVED BY	TITLE	APPROVAL SUBJECT TO

*See Instructions On Reverse Side

APPROVAL SUBJECT TO GENERAL REQUIREMENTS AND SPECIAL STIPULATIONS