

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN 1. LOCATE*
(Other instructions on
reverse side)

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

RECEIVED

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

Petrus Oil Company, L. P. ✓

3. ADDRESS OF OPERATOR

12377 Merit Drive, Suite 1600 Dallas, Texas 75251

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

660' FNL and 1980' FWL of Section 18

At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

5.1 miles north of Carlsbad, NM

C. C. D.

ARTESIA OFFICE

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(Also to nearest drlg. unit line, if any)

660

16. NO. OF ACRES IN LEASE

314.12

17. NO. OF ACRES ASSIGNED
TO THIS WELL

314.12

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

PB to 3890'

20. ROTARY OR CABLE TOOLS

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3208' GL, 3222' KB

22. APPROX. DATE WORK WILL START*

03-17-89

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17-1/2	13-3/8	42	600	1940
11	8-5/8	32	2600	3375
7-7/8	5-1/2	17	11448	1350

Plan to recompleat well as follows:

MIRU workover rig. ND wellhead and NU BOP's. Pull tbgr. Set SVED (EZSV) cement retainer. Squeeze existing perforations at 3800-3858' with 100 sx cement (Premium Plus). Perforate 4 shots at 3700' and squeeze w/250 sx Premium Plus cement. Perforate and test 3522-24, 3535-40, 3543-45, 3549-60'.

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. 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.

24.

SIGNED Suzann Welch Suzann Welch

TITLE Reg. Coordinator

DATE 03-10-89

(This space for Federal or State office use)

PERMIT NO. _____

APPROVAL DATE _____

APPROVED BY _____

TITLE _____

DATE 3-25-89

CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions On Reverse Side