

REPROD. COPY

SUBMIT IN TRIP DATE*
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1425.UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Morris R. Antweil ✓

3. ADDRESS OF OPERATOR

P. O. Box 2010, Hobbs, New Mexico 88240

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

At surface

2080' FSL and 1980' FEL of Section 19.

At proposed prod. zone

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

12 miles Southwest of Carlsbad, New Mexico

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

1980'

16. NO. OF ACRES IN LEASE

878.84

17. NO. OF ACRES ASSIGNED
TO THIS WELL

320

18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

10,800

20. ROTARY OR CABLE TOOLS

Rotary

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

3736 GL

22. APPROX. DATE WORK WILL START*

June 15, 1979

23. 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"	48# H-40	600	Circulate
12-1/4"	8-5/8"	32# K-55	2600	Circulate
7-7/8"	5-1/2"	17&20# N-80	10,800	475 sacks

See Attached For: Supplemental Drilling Data

BOP Sketch

Development Plan for Surface Use

Gas is not Dedicated.

RECEIVED

JUN 13 1979

O. C. C.
ARTESIA, OFFICE

NSL-1039

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

R.M. Willson

TITLE

Agent

DATE

5/25/79

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

6-11-79

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: