|  |                |                              | -                            | •••   |                           |                         |        | - cl?                    | 51                     |                                       |                   |  |  |
|--|----------------|------------------------------|------------------------------|---|---------------------------|-------------------------|--------|--------------------------|------------------------|---------------------------------------|-------------------|--|--|
| District I   | State of Ne    | te of New Mexico             |                              |   |                           | 1                       |        |                          |                        |                                       |                   |  |  |
| 1625 N. Frend<br>District II   | ch Dr., Hob    | bs. NM 882                   | 40                           | Energy Minerals and Natural Resource                                      |                           |                         |        | ITCOS                    | 841                    | V                                     | Form C-101        |  |  |
| 811 South Fir  | st. Artesia.   | NM 88210                     |                              |   |                           |                         |        |                          | с Ци                   | V Revis                               | ed March 17, 1999 |  |  |
| District III Oil C   |                |                              |                              |   |                           | onservation Division    |        |                          |                        | Submit to appropriate District Office |                   |  |  |
| 1000 KIO DIAZOS KOAU, AZIEC, NM 8/410  |                |                              |                              |   |                           | 40 South Pacheco        |        |                          | State Lease - 6 Copies |                                       |                   |  |  |
|  |                |                              |                              |   |                           | ta Fe, NM 87505         |        |                          |                        | Fee                                   | Lease - 5 Copies  |  |  |
|  |                |                              |                              |   | Sunta i e, i e            |                         | 0.5    |                          | Г                      |                                       |                   |  |  |
| APPL   | [CATIO         | ON FOR                       | PERMIT                       | ז זוסת הז   | DE ENTE                   | 'D DF                   | EDEN   | DILICDA                  |                        |                                       | NDED REPORT       |  |  |
|  |                |                              | <sup>1</sup> Operator Name a | nd Address  | , NE-ENTE                 | K, DE                   | EPEN,  | PLUGBA                   | CK, O                  | RADD                                  | AZONE             |  |  |
| OXY USA Inc.   |                |                              |                              |   |                           |                         |        |                          |                        | <sup>2</sup> OGRID Number<br>16696    |                   |  |  |
| P.O. Box 50250   |                |                              |                              |   |                           |                         |        |                          | <sup>3</sup> API N     |                                       |                   |  |  |
| Midland, TX 79710-0250   |                |                              |                              |   |                           |                         |        |                          |                        | 0-015- 31263                          |                   |  |  |
| Proper   | ty Code<br>マルの |                              | <sup>5</sup> Property Name   |   |                           |                         |        |                          | <sup>6</sup> Well No.  |                                       |                   |  |  |
|  |                |                              |                              | estar State   |                           |                         |        | 1                        |                        |                                       |                   |  |  |
| <sup>7</sup> Surface Location  |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
| UL or lot no.  | Section        | Township                     | Range                        | Lot Idn   | Feet from the             | 660 North               |        | Feet from the            | East/West line<br>West |                                       | County            |  |  |
| D  | 36             | 205                          | 27E                          |   | 660                       |                         |        | 660                      |                        |                                       | Eddy              |  |  |
| <u></u>  |                | 8                            | Proposed B                   | Bottom Hole Location If Different From                                    |                           |                         |        | n Surface                |                        |                                       |                   |  |  |
| UL or lot no.  | Section        | Township                     | Range                        | Lot Idn   | Feet from the             | North/South line        |        | Feet from the            | East/West line         |                                       | Country           |  |  |
|  |                | -                            |                              |   |                           |                         |        |                          |                        |                                       | County            |  |  |
| <sup>9</sup> Proposed Pool 1   |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
| Burton Flat Morrow 73280   |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
|  |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
| " Work 1   | <u> </u>       | <sup>12</sup> Well Type Cod  | 13 Cable/Rotary              | Rotary <sup>14</sup> Lease Type Code <sup>15</sup> Ground Level Elevation |                           |                         |        |                          | Level Plant            |                                       |                   |  |  |
| N  |                |                              | G                            | R   | -                         |                         | K-6261 |                          | 3259 1                 |                                       |                   |  |  |
| " Multiple<br>NO   |                | <sup>17</sup> Proposed Depth |                              |   | <sup>10</sup> Formation   |                         |        | <sup>19</sup> Contractor |                        |                                       | 20 Spud Date      |  |  |
| L  |                | [                            | 11400                        |   | Morrow                    |                         |        | UTI                      |                        | 7/22/00                               |                   |  |  |
| <sup>21</sup> Proposed Casing and Cement Program   |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
| Hole Size  |                | Casing Size                  |                              | Casing weigh  |                           | Setting Depth           |        | Sacks of Cement          |                        | Estimated TOC                         |                   |  |  |
| 17-1/2"  |                | 13-3/8"                      |                              | 48  | #                         | 600'                    |        | ,550sx                   |                        | Circulate                             |                   |  |  |
| 12-1/4"  |                |                              | 9-5/8''                      | 31  | L#                        | 3000 25                 |        | <b>50</b> . 850sx        |                        | Circulate                             |                   |  |  |
| <del>0-574</del>   |                | ð                            | 5-1/2"                       | 17  | #                         | 11400'                  |        | 775sx                    |                        | Est 8300'                             |                   |  |  |
| -1 "63"  |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
|  |                |                              |                              |   |                           |                         |        |                          | <b>.</b>               |                                       |                   |  |  |
| 22 Describe 1  | the propose    | d program                    | If this application          |   |                           |                         |        | L                        |                        |                                       |                   |  |  |
| represent productive zone and proposed new productive  |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
| zone. Describe the blowout prevention program, if any. Use additional sheets if necessary.                               |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
|  |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
|  |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
| Notify OCD at SPUD & TIME SEE OTHER SIDE   |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
| to witness comenting the   |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
| <u>85/8</u> casing. Minimum WOC time 8hrs.   |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
|  |                |                              |                              |   |                           |                         | 10     |                          |                        |                                       |                   |  |  |
| <sup>23</sup> I hereby certify that the information given above is true and complete to the OIL CONSERVATION DURING TO I |                |                              |                              |   |                           |                         |        |                          |                        |                                       |                   |  |  |
| best of my know  |                |                              |                              |   | OIL CONSERVATION DIVISION |                         |        |                          |                        |                                       |                   |  |  |
| Signature:   | 'Sh            |                              | Appro                        | Approved by ORIGINAL SIGNED BY TIM W. GUM                                 |                           |                         |        |                          |                        |                                       |                   |  |  |
| Printed name:  | tewart         |                              |                              | Title:  |                           |                         |        |                          |                        |                                       |                   |  |  |
| Title:   | ory Analy      | st                           |                              | Approval Date: <b>ADL 19 2000</b> Expiration Date <b>UL 19 2001</b>       |                           |                         |        |                          |                        |                                       |                   |  |  |
| Date: 7/19/00 Phone: 915-685-5717  |                |                              |                              |   |                           | Conditions of Approval: |        |                          |                        |                                       |                   |  |  |
| 1110   | 1              |                              |                              |   |                           | Ì                       |        |                          |                        |                                       |                   |  |  |

Attached

.

OXY Battlestar State #1 660 FNL 660 FWL SEC 36 T20S R27E Eddy County, NM State Lease No. V-6261-0002

PROPOSED TD: 11400' TVD

BOP PROGRAM: 0' - 600' None 600' - 3000' 13-3/8" 3M annular preventer. 3000' - 11400' 11" 5M blind pipe rams with 5M annular preventer and rotating head below 8300'.

- CASING: Surface: 13-3/8" OD 48# H40 ST&C new casing set at 600' Intermediate: **8**-5/8" OD 3**2**# K55 ST&C new casing from 0-3000' Production: 5-1/2" OD 17# N80-S95 LT&C new casing from 0-11400'
- **CEMENT:** Surface Circulate cement with 350sx 35:65 POZ/C with 6% Bentonite + 2%  $CaCl_2$  + .25#/sx Cello-Seal followed by 200sx Cl C with 2%  $CaCl_2$ .

Intermediate - Circulate cement with 650sx 35:65 POZ/C with 6% Bentonite + 2%  $CaCl_2$  + .25#/sx Cello-Seal followed by 200sx Cl C with 2%  $CaCl_2$ .

Production - Cement with 700sx 15:61:11 POZ/C/CSE with .5% FL-52 + .5% FL-25 + 8#/sx Gilsonite followed by 75sx Cl C with .7% FL-25. Estimated top of cement is 8300'.

Note: Cement volumes may need to be adjusted to hole caliper.

MUD: 0 - 600' Fresh water/native mud. Lime for pH control (9-10). Paper for seepage. Wt 8.7-9.2 ppg, Vis 32-34 sec 600' - 3000' Fresh/\*Brine water. Lime for pH control (10.0-10.5). Paper for seepage. Wt 8.3-9.0/10.0-10.1ppg, Vis 28-29 sec \*Fresh water will be used unless chlorides in the mud system increases to 20000PPM. 3000' - 8300' Fresh water. Lime for pH control(9-9.5). Paper for seepage. Wt 8.3-8.5 ppg, Vis 28-29 sec 8300' - 10000' Cut brine. Lime for pH control (10-10.5). Wt 9.6-10.0 ppg, Vis 28-29sec 10000' - 11400' Mud up with an Duo Vis/Flo Trol mud system. Wt 9.6-10.0ppg, Vis 32-36sec, WL<10cc

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