

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

JAN 24 1992

O. C. D.
ARTESIA OFFICE

API NO. (assigned by OCD on New Wells)
30-015-21466

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
L-4241

7. Lease Name or Unit Agreement Name

Carlsbad State Comm

8. Well No.

1

9. Pool name or Wildcat

South Carlsbad Morrow

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☐ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☒

b. Type of Well:

OIL WELL ☐ GAS WELL ☒ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. Name of Operator

Samedan Oil Corporation

3. Address of Operator

10 Desta Drive, Suite 240 East, Midland, Texas 79705

4. Well Location

Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line

Section 34 Township 23S Range 26E NMPM Eddy County

10. Proposed Depth

11,285'

11. Formation

Atoka

12. Rotary or C.T.

13. Elevations (Show whether DF, RT, GR, etc.)

3292.9 GR

14. Kind & Status Plug. Bond

15. Drilling Contractor

None

16. Approx. Date Work will start

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
	12 3/4		503		Surface
	8 5/8" & 7"	32# & 23#	5477	3054sx	
	4 1/2"	13.5#	11,795	500sx	

1. Set CIBP @ 11,295' \pm & dump 10' cement in 4 1/2" 13.5# CSG.

2. TIH w/PKR. Set @ 10,550' & swab dry.

3. Press CSG to 1000#.

4. Perf 10,602-610' (1 JSPF) & 10,504-08 (1 JSPF) - 14 holes.

Present producing zone is Morrow with Perfs @ 11,410'-11,732' (35 holes)
producing through 2 3/8" TBG w/PKR set @ 11,299.

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.

SIGNATURE

Judy Throneberry

TITLE

Division Production Clerk

DATE

1-22-92

TYPE OR PRINT NAME

Judy Throneberry

TELEPHONE NO. (915)684-8491

(This space for State Use)

ORIGINAL SIGNED BY

MICHAEL WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

FEB 7 1992

CONDITIONS OF APPROVAL, IF ANY: