

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

Amoco Production Company ✓

3. ADDRESS OF OPERATOR

P. O. Box 68 Hobbs, NM 88240

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

At surface

At proposed prod. zone

1650' FSL & 1980' FEL, Sec. 20
(Unit J, NW/4, SW/4)C. C. D.
ARTESIA, OFFICE

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

7 miles southeast of Carlsbad, NM

15. DISTANCE FROM PROPOSED*

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

16. NO. OF ACRES IN LEASE

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

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

19. PROPOSED DEPTH

20. ROTARY OR CABLE TOOLS

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

3077' GR

22. APPROX. DATE WORK WILL START*

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH
	Existing casing will not be altered		

RECEIVED

MAR 17 1981

U.S. GEOLOGICAL SURVEY
ARTESIA, NEW MEXICO

Propose to recomplete to the Delaware per the following:

Pull tubing, packer and tailpipe. Set a cast iron bridge plug at 5950' and cap with 35' cement. Perforate 3324-3340' X 2 JSPF. Run tubing, and packer. Acidiz; with 2500 gal. 7-1/2% HCL with additives. Test well to evaluate productivity.

0+4-USGS, A 1-Hou 1-Susp 1-W. Stafford, Hou 1-LBG

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

Benton Green

TITLE Assist. Admin. Analyst

DATE 3-16-81

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

