

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on
reverse side)

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

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 BORE ☐ MULTIPLE BORE ☐

2. NAME OF OPERATOR

BTA OIL PRODUCERS

RECEIVED

3. ADDRESS OF OPERATOR

104 South Pecos Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)
At surface 566' FSL & 1,312' FEL

At proposed prod. zone

O. C. D.

ARTESIA OFFICE

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

24 Miles Southwest from Carlsbad

1A. DISTANCE FROM PROPOSED LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drig. unit line, if any) 566'

16. NO. OF ACRES IN LEASE 320

17. NO. OF ACRES ASSIGNED TO THIS WELL 320

1A. DISTANCE FROM PROPOSED LOCATION TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. None

18. PROPOSED DEPTH 9,950 TD

20. NOTARY OR CABLE TOOLS Workover

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

3,919' GR 3,933' K.B.

22. APPROX. DATE WORK WILL START* 7/7/88

23. EXISTING PERFORATING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17-1/2"	13-3/8"	54.5#	408'	450 SX - Circ.
12-1/4"	8-5/8"	24 & 32	2,600'	1500 SX - Circ.
7-7/8"	5-1/2"	17 & 23	9,950'	2300 SX - TOC 1100'

Set CIBP @ 9,725' w/ 20' cmt.

Set CIBP @ 8,980' w/ 20' cmt.

Proposed:

Set CIBP @ 8,800' & cap w/ 20' cmt.

Spot 200 gals. 10% acid @ 8,292'.

Perf. 8,280' - 8,292' (Cisco)

Swab & test to evaluate zone.

RECEIVED
JUL 11 9 46 AM '88
CARLSBAD AREA OFFICE

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 Dorothy Houghton TITLE Regulatory Supervisor DATE 7/8/88

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE 7-19-88

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side