

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED  
SUBMIT IN PLICATE  
(Other instructions on reverse side)

MAR 18 1986

30-015-25596  
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 ZONE ☒

MULTIPLE ZONE ☐

2. NAME OF OPERATOR

THE PETROLEUM CORPORATION OF DELAWARE

3. ADDRESS OF OPERATOR

3811 TURTLE CREEK BLVD., SUITE 350 DALLAS, TEXAS 75219

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

At surface

1987' FWL & 630' FSL

At proposed prod. zone

UNIT LETTER  
N SE/4 SW/4

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

30 AIR MILES SO-SO EAST OF CARLSBAD, N.M.

15. DISTANCE FROM PROPOSED\*

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

630

16. NO. OF ACRES IN LEASE

160

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.

80'

19. PROPOSED DEPTH

3500

20. ROTARY OR CABLE TOOLS

ROTARY

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

3019.4 GR

22. APPROX. DATE WORK WILL START\*

AS SOON AS RIG IS AVAILABL

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4	8 5/8	24#	700	SUFFICIENT TO CIRC TO SURF CEMENT INTO 8 5/8" CASING
7 7/8	5 1/2	15.5#	3500	

PAY ZONE WILL BE SELECTIVELY PERFORATED & STIMULATED AS NEEDED.

- ATTACHED ARE:
1. WELL LOCATION & ACREAGE DEDICATION PLOT.
  2. SUPPLEMENTAL DRILLING PLAN.
  3. SURFACE USE PLAN.
  4. THIRTEEN POINT PROGRAM.

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

*P. Thomas*

TITLE MANAGER OF OPERATIONS

DATE 2-10-86

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL SUBJECT TO  
GENERAL REQUIREMENTS AND  
SPECIAL STIPULATIONS

\*See Instructions On Reverse Side