SUBMIT IN TRIPLICATE*

Form approved. Budget Bureau No. 42-R.425.

(Other instructions on reverse side)

RTMENT	OF	THE	INTE	RIOR

UNITED STATES

GEOLOGICAL SURVEY						NOO-C-14-2	0-5528
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK						6. IF INDIAN, ALLOT	TEE OR TRIBE NAME
DRILL TYPE OF WORK DEEPEN DEEPEN PLUG BACK						NAVAJO ALL 7. UNIT AGREEMENT	
b. TYPE OF WELL OIL GA WELL W	AS OTHER		SINGLE ZONE	MULTIPLE Zone		S. FARM OR LEASE	NAME
2. NAME OF OPERATOR						INDIAN	17
JAMES L. LUDWICK						WELL NO.	
3. ADDRESS OF OPERATOR P.O. Box 70						3 🚅	
Farmington, New Mexico 87401					1	O. FIELD AND POOL	, OR WILDCAT
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*) At surface						WILDCAT MV	
At proposed prod. zone 1650'FNL, 530'FWL						11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
						Sec. 17, T19N,R5W	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*						2. COUNTY OR PARI	SH 13. STATE
30 miles SW Cuba, New Mexico						IcKinley	New Mexic
15. DISTANCE FROM PROPOSED* LDCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drig. unit line, if any)					17. NO. OF TO THIS	ACRES ASSIGNED WELL 40	
18. DISTANCE FROM PROP TO NEAREST WELL, D OR APPLIED FOR, ON TH	RILLING, COMPLETED,		19. PROPOSED DEPTH 2200' Point I		20. ROTARY	Rotary	
21. ELEVATIONS (Show who							WORK WILL START
LING OPERATIONS AUTHORIZED ARE 6640 GR					April 20,	1983	
EC表.TO COMPLIANCE WIT	TH ATTACHED 1	PROPOSED CASIN	G AND CEMENTING	G PROGRAM	∡ This act	ion is subject to	edministrative
VERAL REQUIREMENTS"			,			onie aceles 30°C!	
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FO		DEPTH			
	1 7	24 -	60			c Circulated	
8-3/4	/	. !	2200				
8-3/4 6½	4½	9.5	2200		250 s	c. Circulate	ed 295fr3(10
	4½	9.5	2200		250 sz	c. Circulate	ed 295fr3(1)

ATTACHMENTS SEE NTL-6

Gas is not dedicated.



OIL CON. DIV. DIST. 3

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 ble wout preventer program,/if any. Agent SIGNED (This space for Federal or State office use APPROVAL DATE APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY : *See Instructions On Reverse Side

NMOCE