District I

1625 N. French Dr., Hobbs, NM 88240

District II

811 S. First Street, Artesia, NM 88210

1000 Rio Brazos Rd, Aztec, NM 87410

District IV

State of New Mexico

Energy Minerals and Natural Resources

Revised A ch 17, 1999

123456

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Form C-101

Instructions On Back

Submit to Appropriate District Office

State Lease - 6 Copies

Fee Lease - 5 Copies

OIL CONSERVATION DIVISION 2040 South Pacheco Santa Fe, NM 87504-2088

2040 South Pacheco, Santa Fe, NM 87505 AMENDED REPORT APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE 1 Operator Name and Address ELKOIL COMPANY 7147 P.O. BOX 310 3 API Number ROSWELL, NEW MEXICO 88202-0310 30-005-72763 4 Property Code 5 Property Name 6 Well No. 3971 JAN STATE 1 Surface Location UL or Lot No. Section Township Range Lot Idn Feet from the North/South Line Feet from the East/West Line County 36 K 8 SOUTH 26 EAST 1980 SOUTH CHAVES 1980 **WEST**

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UL or Lot No.	Section	Township	Range	Lot Ind	Feet from the	North/South Line	Feet from the	East/West Line	County	
	1								-	
	Ļ	0 Branco d Brand					<u> </u>			
9 Proposed Pool 1					10 Proposed Pool 2					
toer	Kane L	Pre-Pe			Ì					

11 Work Type Code			14 Lesse Type Code	15 Ground Level Elevation	
PA	G	N/A	S	3931' GR	
16 Multiple	17 Proposed Depth	18 Formation	19 Contractor	20 Spud Date	
NO	6405'	PENN	N/A	1/22/01	

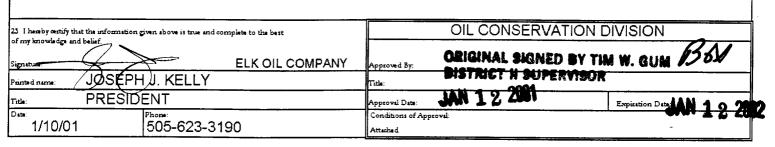
21 Proposed Casing and Cement Program Hole Size Casing Size Casing weight/foot Setting Depth Sacks of Cement Estimated TOC 12 1/4" 8 5/8" 1016' 575 SXS 24# 7 7/8 " 5 1/2" 17# 6405' 400 SXS A 1112137

22. Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone Describe the blowout prevention program, if any. Use additional sheets if necessary.

PROPSE TO PLUG BACK TO THE PENN FORMATION.

- (1) Set CIBP @ 6220'.
- (2) Perforate 6130'-6150' and 6177'-6182'.
- (3) Acidized and production test.

Standard BOP.



C-101 Instructions

Measurements and dimensions are to be in feet/inches. Well locations will refer to the New Mexico Principal Meridian.

IF THIS IS AN AMENDED REPORT CHECK THE BOX LABELED "AMENDED REPORT" AT THE TOP OF THIS DOCUMENT.

- Operator's name and address.
- 2 Operator's OGRID number. If you do not have one, it will be assigned and filled in by the District office.
- 3 API number of this well. If this is a new drill the OCD will assign the number and fill this in.
- 4 Property code. If this is a new property the OCD will assign the number and fill it in.
- 5 Property name that used to be called 'well name'.
- 6 The number of this well on the property.
- The surveyed location of this well New Mexico Principal Meridian. NOTE: If the United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD Unit Letter.
- 8 The proposed bottom hole location of this well at TD.

9 and 10 The proposed pool(s) to which this well is being drilled.

- 11 Work type code from the following table:
 - N New well
 - E Re-entry
 - D Drill deeper
 - P Plugback
 - A Add a zone
- 12 Well type code from the following table:
 - O Single oil completion
 - G Single gas completion
 - M Multiple completion
 - I Injection well
 - S SWD well
 - W Water supply well
 - C Carbon dioxide well
- 13 Cable or rotary drilling code
 - C Propose to cable tool drill
 - R Propose to rotary drill
- Lease type code from the following table:
 - S State
 - P Private
- 15 Ground level elevation above sea level.
- 16 Intend to multiple complete? Yes or No. Attach intended well bore diagram.
- 17 Proposed total depth of this well.
- 18 Geologic formation at TD.
- 19 Name of the intended drilling company if known.
- 20 Anticipated spud date.
- Proposed hole size ID inches; proposed casing OD inches, casing weight in pounds per foot, setting depth of the casing or depth and top of liner, proposed cementing volume, and estimated top of cement.
- 22 Brief description of the proposed drilling program and BOP program. Attach additional sheets if necessary.
- The signature, printed name, and title of the person authorized to make this report. The date this report was signed and the telephone number to call for questions about this report.