

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONTACT
OFFICE OF LAND
OF COPIES REQUIRED
(Other Instructions on
reverse side)

MM Roswell District
Modified Form No.
NMXO-3160-2

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☐

DEEPEN ☒ 7 '90

PLUG BACK ☒

b. TYPE OF WELL

OIL
WELL ☒

GAS
WELL ☐

OTHER

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

McClellan Oil Corporation

3. Area Code & Phone No.
505-622-3200

3. ADDRESS OF OPERATOR

P O Drawer 730, Roswell, NM 88202

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

At proposed prod. zone

660' FSL & 1980' FWL

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

22 miles North

15. DISTANCE FROM PROPOSED*

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

660'

16. NO. OF ACRES IN LEASE

1600'

17. NO. OF ACRES ASSIGNED
TO THIS WELL

80

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

9450'

20. ROTARY OR CABLE TOOL

Pulling unit

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

3727 KB

22. APPROX. DATE WORK WILL START*

9-17-90

PROPOSED CASING AND CEMENTING PROGRAM

HOLE SIZE	CASING SIZE	WEIGHT/FOOT	GRADE	THREAD TYPE	SETTING DEPTH	QUANTITY OF CEMENT
17 1/2	13 3/8	68#	J-55	8rd		Circulated
12 1/4	8 5/8	24#	J-55	8rd		Circulated
7 7/8	5 1/2	17 & 20#	N-80	8rd		500 sx

1. Propose to set CIBP at 9450' w/30' of cmt on top
2. Perf interval from 9292' to 9358' (Cisco)
3. Test & evaluate zone

REVISED

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

Michael Lee

TITLE

Drlg. & Comp. Engr.

DATE

9-10-90

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

PETER J. JENKINS

DATE

9-20-90

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side