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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

REENITRY

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	
L - 5288	

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name	
2. Name of Operator Yates Petroleum Corporation		Union Oil "PF" Stat	
3. Address of Operator 207 S. 4th Street, Artesia, NM 88210		9. Well No. 1	
4. Location of Well UNIT LETTER <u>G</u> LOCATED <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>7</u> TWP. <u>11S</u> RGE. <u>38E</u> NMPM		10. Field and Pool, or Wildcat Undesignated	
		12. County Lea	
		19. Proposed Depth 11943'	
		19A. Formation Devonian	
		20. Rotary or C.T. Reverse Un	
21. Elevations (Show whether D.F., R.T., etc.) 3935		21A. Kind & Status Plug. Bond Blanket	
		21B. Drilling Contractor 55 pulling unit	
		22. Approx. Date Work will start ASAP	

23.

### PROPOSED CASING AND CEMENT PROGRAM

Expiring lease

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2"	11 3/4"		345'	in place (240)	
10 3/4"	8 5/8"		4344'	in place (1400)	
7 7/8"	5 1/2 or 4 1/2"	17# or 11#	TD		

We propose to drill plug and clean out hole to original TD, then test the Devonian and intermediate formations. If commercial, production casing will be run and cemented with adequate, cover perforate, and stimulate as needed for production. This well drilled by Cabeen Exploration in August of 1963.

MUD PROGRAM: Native mud to 7600' Gel Starch KCL w/ 8-9% oil to TD.

BOP PROGRAM: BOP's and hydril will be installed at the start on the 8 5/8" casing and tested, pipe rams tested daily, blind rams on trips. Will Yellow Jacket prior to drilling Wolfcamp.

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 2/29/81  
UNLESS DRILLING UNDERWAY

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. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed [Signature] Title Geographer Date 1-27-81  
(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT 7 DATE   
CONDITIONS OF APPROVAL, IF ANY: