

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Injection

SINGLE
ZONE ☒MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Amoco Production Company

3. ADDRESS OF OPERATOR

P. O. Box 68, Hobbs, New Mexico 88240

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

At surface 990' FSL X 330' FWL, Sec. 29

(Unit M, SW/4, SW/4)

At proposed prod. zone

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

2 miles south, 3 miles West of Milnesand, NM

15. DISTANCE FROM PROPOSED*

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

16. NO. OF ACRES IN LEASE

1920

17. NO. OF ACRES ASSIGNED

40

18. DISTANCE FROM PROPOSED LOCATION*

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

19. PROPOSED DEPTH

20. ROTARY OR CABLE TOOLS

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

4222 RDB

22. APPROX. DATE WORK WILL START*

12-15-82

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	412	225 SX
7-7/8"	4-1/2"	9.5	4714	250 SX

Propose to deepen well to 4773' and stimulate in order to increase injectivity and improve sweep pattern. Will use the following procedure:

Pull packer set at 4670'. Drill to 4773' and perforate 4690'-4696' 4700' 4712' 4712'-4714'. Acidize with 3000 gal 15% LSTNE/FE acid with 600# of rock salt in 500 gal gelled brine. Flush with 22 bbl lease water. Swab back and return to injection.

O+6-MMS,R 1- DMF 1-W. Stafford, Hou 1-Hou

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present, productive, 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

Mark Freeman

TITLE Assist. Admin. Analyst

DATE 12-10-82

(This space for Federal or State office use)

(Orig. Sgd.) GEORGE H. STEWART

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

RECEIVED
NOV 17 1982
OFFICE
HOBBS