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NEW MEXICO OIL CONSERVATION COMMISSION **HOBBS OFFICE O.C.C.**
Form 1-1-65
Revised 1-1-65

Mar 30

A. Indicate Type of Lease
STATE **N.M.** FEE ☐

5. State Oil & Gas Lease No.
K 3935

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"/> DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name N. M. State "AZ"	
2. Name of Operator Sunray Oil Company		9. Well No. 16	
3. Address of Operator P. O. Box 1416 - Roswell, New Mexico		10. Field and Pool, or Wildcat Chaverro San Andres	
4. Location of Well UNIT LETTER M LOCATED 990 FEET FROM THE South LINE AND 990 FEET FROM THE West LINE OF SEC. 34 TWP. 78 RGE. 33E NMPM		12. County Roosevelt	
19. Proposed Depth 4470		19A. Formation San Andres	20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) Furnish Later	21A. Kind & Status Plug. Bond Approved	21B. Drilling Contractor Cactus Corp.	22. Approx. Date Work will start 3-31-66

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4	8 5/8	24	350	250	Circ.
7 7/8	4 1/2	9.5	4470	200	3100

1. Prepare location and move in rotary rig.
2. Drill 12 1/4" hole to 350'. Run 8 5/8", 24#, J-55 Csg. Cmt csg w/250 sz reg. cmt. 2% CaCl₂ - Circulate cmt. WOC 18 hrs. Test to 1000 psig for 30 min.
3. Drill 7 7/8" hole to 4470' TD. Run open hole logs. Run 4 1/2", 9.5#, J-55 csg. to 4470' TD. Cmt. w/200 sz Incon Pos 2% gel. WOC 24 hrs. and test to 1000 psig for 30 min.
4. Completion procedure will be determined from open hole and log analysis.

LOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTION. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

B. F. Brawley Title **District Engineer** Date **3-29-66**
(This space for State Use)

VED BY _____ TITLE _____ DATE _____
IONS OF APPROVAL, IF ANY: