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NEW MEXICO OIL CONSERVATION COMMISSION

HOBBS OFFICE

Revised 1-1-65

May 24 4 09 PM '68

5. State Oil & Gas Lease No.	K-1370
6. Indicate Type of Lease	<input checked="" type="checkbox"/> FEE <input type="checkbox"/>

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work	DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>	7. Unit Agreement Name	-----
b. Type of Well	OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	8. Farm or Lease Name	Hobbs "V"
2. Name of Operator	SKELLY OIL COMPANY	9. Well No.	9
3. Address of Operator	P. O. Box 730 Hobbs, New Mexico 88240	10. Field and Pool, or Wildcat	Chaveroo San Andres
4. Location of Well	UNIT LETTER "V" LOCATED 1650 FEET FROM THE North LINE AND 1650 FEET FROM THE West LINE OF SEC. 29 TWP. 7S RGE. 34E NMPM	12. County	Roosevelt
19. Proposed Depth	4500'	19A. Formation	San Andres
20. Rotary or C.T.			Rotary
21. Elevations (Show whether DF, RT, etc.)	Unknown	21A. Kind & Status Plug. Bond	Blanket Bond No. 1253688 \$100,000,000 with Fed. Ins.
21B. Drilling Contractor	Cactus Drig. Co.	22. Approx. Date Work will start	Immediately

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8-5/8"	24#	350'	250'	Surface
7-7/8"	4-1/2"	10.5#	4500'	350	3780'

The pump and plug process will be used in cementing both strings of casing and cement will be circulated to the surface on the 8-5/8" casing. The 4-1/2" casing will be perforated and the San Andres Zone treated with approximately 2,000 gallons of regular acid. 30,000 gallons oil and 30,000# 20/40 sand.

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO RUNNING CASING.

APPROVAL VALID FOR 90 DAYS UNLESS DRILLING COMMENCED.

EXPIRES 8-27-68

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 _____ Title **District Superintendent** Date **May 24, 1968**

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY