

30-041-20763

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name Metzger	
9. Well No. 8	
10. Field and Pool, or Wildcat Chaveroo (San Andres)	
12. County Roosevelt	
19. Proposed Depth 4500'	19A. Formation San Andres
20. Rotary or C.T. Rotary	
21. Elevation (Show whether DE, RT, etc.) 4314.5 GL	21A. Kind & Status of Log, etc. Blanket on file
21B. Drilling Contractor Norton	22. Approx. Date Work will start November 10, 1984

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>	
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"/>	
2. Name of Operator NRM Petroleum Corporation	
3. Address of Operator 600 W. Illinois, Suite 800 Midland, Texas 79701	
4. Location of Well UNIT LETTER <u>O</u> LOCATED <u>467</u> FEET FROM THE <u>South</u> LINE AND <u>2173</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>17</u> TWP. <u>7-S</u> R. <u>34-E</u> N. <u>10</u>	
21. Elevation (Show whether DE, RT, etc.) 4314.5 GL	
21A. Kind & Status of Log, etc. Blanket on file	
21B. Drilling Contractor Norton	
22. Approx. Date Work will start November 10, 1984	

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	1600'	1100	Surface
7 7/8"	4 1/2"	10.50	4500'	1000	1500'

Drill 12 1/4" hole to 1600' set 8 5/8" surface casing. Cement w/1100 sx to circulate. Drill 7 7/8" hole to top of San Andres P-2 and cut 60' core. If commercial production is indicated run 4 1/2" csg. Norton Rig #7. Blow out preventers 300# LWP double Hydraulic.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 5/2/85
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 Cecil Tucker Title Operations Manager Date October 31, 1984

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DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE NOV - 2 1984

CONDITIONS OF APPROVAL, IF ANY: