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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

JUN 27 8 09 AM '66

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>

5. State Oil & Gas Lease No.
OG 1062

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
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 checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name State F	
2. Name of Operator Kerr-McGee Corporation		9. Well No. 4	
3. Address of Operator Box K Sunray Texas		10. Field and Pool, or Wildcat Chavaroo	
4. Location of Well UNIT LETTER F LOCATED 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE OF SEC. 2 TWP. 8 S RGE. 33 E NMPM		12. County Chaves	
19. Proposed Depth 4500		19A. Formation San Andres	
20. Rotary or C.T. Rotary		21. Elevations (Show whether DF, RT, etc.) In effect	
21A. Kind & Status Plug. Bond In effect		21B. Drilling Contractor	
22. Approx. Date Work will start 6-28-66			

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	400	275	Circulate
7 7/8	5 1/2	14	4500	350	3200

Drill 12 1/4" hole with rotary to 400'. Set 8 5/8" OD 24# casing and cement to surface. Then drill 7 7/8" hole to 4500' and set 5 1/2" OD 14# casing and cement with 350 sacks cement. Run logs and complete in the San Andres. Will install 8" Shaffer, Type 45 BOP's with pipe rams in top and Blind rams in bottom. Casinghead outlets will be used for kill and choke lines.

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED,
EXPIRES 7-26-66

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 W. C. Barton Title Division Supt. Production Date 6-23-1966
(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

