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5A. Indicate Type of Lease
STATE ☐ FEE ☒
5. State Oil & Gas Lease No.

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 Doyal	
2. Name of Operator Yates Drilling Company		9. Well No. 2	
3. Address of Operator 207 S. 4th, Artesia, New Mexico 88210		10. Field and Pool, or Wildcat SE Chaves Queen	
4. Location of Well UNIT LETTER P LOCATED 500 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE OF SEC. 27 TWP. 12S RGE. 31E NMPM		11. County Chaves	
19. Proposed Depth 3100'		19A. Formation Queen	
20. Rotary or C.T. Rotary		21. Elevations (show whether Df, Rf, etc.) 4426' GL	
21A. Kind & Status Plug. Bond Blanket		21B. Drilling Contractor L&M	
22. Approx. Date Work will start ASAP			

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/2"	8 5/8"	24# J-55	400'	300 sx circ	
7 7/8"	4 1/2"	9.5# J-55	TD	200 sx/tie back	to base of salt

We propose to drill and test the Queen and intermediate formations. Approximately 400' of surface casing will be set and cement circulated to shut off gravel and caving. If needed (lost circulation) 7" intermediate casing will be run to 1900' and cemented with enough cement calculated to tie back into the surface casing. If commercial, production casing will be run and cemented with adequate cover, perforated and stimulated as needed.

MUD PROGRAM: FW 400', 10# Brine to TD. Mud up s/SW gel to log. LCM if needed.

BCP PROGRAM: BOP's will be installed after setting the 8 5/8" casing and tested daily.

APPROVAL VALID FOR 90 DAYS
PERMIT EXPIRES 11-24-84
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 Eddie W. Seay Title Regulatory Agent Date 8/23/84

(This space for State Use)

Eddie W. Seay

APPROVED BY Oil & Gas Inspector TITLE Oil & Gas Inspector DATE AUG 24 1984

CONDITIONS OF APPROVAL, IF ANY:

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AUG 24 1984

U.S. CO.
POST OFFICE