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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5A. Indicate Type of Lease
STATE ☐ FEE ☒

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

a. Type of Work

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. Type of Well

OIL WELL ☒

GAS WELL ☐

OTHER

SINGLE ZONE ☐

MULTIPLE ZONE ☐

c. Name of Operator

YATES DRILLING COMPANY

d. Address of Operator

207 South 4th Street, Artesia, New Mexico 88210

e. Location of Well

UNIT LETTER I

LOCATED 1980

FEET FROM THE South LINE

ND 990

FEET FROM THE

East

LINE OF SEC. 27

TWP. 12S

RGE. 31E

NMPM

7. Unit Agreement Name

8. Farm or Lease Name

Doyal

9. Well No.

3

10. Field and Pool, or Wildcat

SE Chaves Queen

12. County

Chaves

19. Proposed Depth

3100'

19A. Formation

Queen

20. Rotary or C.T.

Rotary

1. Elevations (Show whether DT, RL, etc.)

4429' GL

21A. Kind & Status Plug. Bond

Blanket

21B. Drilling Contractor

L & M

22. Approx. Date Work will start

ASAP

3.

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'	300sx circ	
7 7/8"	5 1/2"	14# J-55	TD	200sx/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" Drine to TD. Mud up s/SW gel to log. LCM if needed.

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

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 3/18/85
UNLESS DRILLING UNDERWAY

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 Glenn Kelly Title Regulatory Agent Date 9/18/84

(This space for State Use)

ORIGINAL 20

APPROVED BY DATE TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

SEP 18 1984