

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

IL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

30-025-28871
Form C-101
Revised 10-1-78

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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

Type of Work
Type of Well
DRILL ☒ DEEPEN ☐ PLUG BACK ☐
OIL WELL ☒ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

Name of Operator
Yates Petroleum Corporation

Address of Operator
207 S. 4th, Artesia, New Mexico 88210

Location of Well
UNIT LETTER E LOCATED 2310 FEET FROM THE North LINE

330 FEET FROM THE East LINE OF SEC. 13 TWP. 14S RGE. 33E NMPM

5A. Indicate Type of Lease
STATE ☐ FEE ☒
5. State Oil & Gas Lease No.
LG-2414
7. Unit Agreement Name
8. Farm or Lease Name
Chalupa "AAD" State
9. Well No.
1
10. Field and Pool, or Wildcat
Wildcat
12. County
Lea

11. Elevations (Show whether DF, RT, etc.)
4181.3' GL
19. Proposed Depth
10,450'
19A. Formation
Bough "C"
20. Rotary or C.T.
Rotary
21A. Kind & Status Plug. Bond
Blanket
21B. Drilling Contractor
Undesignated
22. Approx. Date Work will start
ASAP

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2"	13 3/8"	48# H-40	450'	450 sx	circulated
12 1/4"	8 5/8"	24#&29# K-55/S-80	4250'	1500 sx	circulated
7 7/8"	5 1/2"	17# K-55/N-80	TD	450 sx	

We propose to drill and test the Bough "C" and intermediate formations. Approximately 450' of surface casing will be set and cement circulated to shut off gravel and caving. If commercial, production casing will be run and cemented with adequate cover, perforated and stimulated as needed for production.

MUD PROGRAM: FW gel/LCM surface to 450', FW to 4250', SW gel/starch to TD.

BOP PROGRAM: BOP's will be installed at the offset and tested daily.

APPROVAL VALID FOR 90 DAYS
PERMIT EXPIRES 11-23-84
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 PRODUCTION 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.

by Cy Conner Title Regulatory Agent Date 8/22/84

(This space for State Use)

Eddie W. Seay

PROVED BY Oil & Gas Inspector TITLE _____ DATE AUG 23 1984

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 23 1984

O.C.D.
HOBBS OFFICE