

30-041-20631

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-101
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
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

1a. Type of Work
b. Type of Well
OIL WELL ☒ GAS WELL ☐ OTHER ☐
DRILL ☒ DEEPEN ☐ PLUG BACK ☐
SINGLE ZONE ☐ MULTIPLE ZONE ☐

7. Unit Agreement Name

8. Farm or Lease Name

Taylor

9. Well No.

1

10. Field and Pool, or Wildcat

Peterson Mississippi

2. Name of Operator
TRI-STATE PRODUCTION & SUPPLY INC.

3. Address of Operator
P.O. Box 1182, Hobbs, New Mexico 88240

4. Location of well
UNIT LETTER G LOCATED 1980 FEET FROM THE North LINE

AND 2130 FEET FROM THE East LINE OF SEC. 28 TWP. 4 S RGE. 33 E NMPM

12. County

Roosevelt

15. Proposed Depth 8400
19A. Formation Missi. Line
20. Rotary or C.T. Rotary

21. Elevations (show whether D.F., K.I., etc.) G.L. 4319.0
21A. Kind & Status Plug Bond No. 399223
21B. Drilling Contractor Western Surety Co. Republic Drilling
22. Approx. Date Work will start December 9, 1981

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
16 3/4	13 3/8	54#	350	400	Circulate
12 1/4	8 5/8	24#	2000	1150	Circulate
7 7/8	4 1/2	10.5# & 11.6#	8400	950	6000'

Drill to 8400' in search of oil.

Will set 13 3/8 surface casing, 13 3/8" X 3000 psi braiden head flange and a 12" 3000 psi BOP will be installed before drilling the intermediate hole. After 8 5/8" casing is set, a 8 5/8 X 3000 psi braiden head will be installed. A 12" X 3000 psi double hydraulic BOP and a 12" 3000 psi hydril will be installed on the 8 5/8" braiden head. A 3000 psi choke manifold will be used from 2000 feet to T.D.

APPROVED FOR 180 DAYS
PERMIT NO. 61812
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 Aubrey E. Kenyon Title Corporation President Date 12-4-81

(This space for State Use)

APPROVED BY DATE
CONDITIONS OF APPROVAL