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5A. Indicate Type of Lease
STATE ☒ FEE ☐
5. State Oil & Gas Lease No.
B-11078

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL ☒ DEEPEN ☐ PLUG BACK ☐ OIL WELL ☒ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☒ MULTIPLE ZONE ☐		8. Farm or Lease Name State NC Com	
2. Name of Operator AMOCO PRODUCTION COMPANY		9. Well No. 1	
3. Address of Operator P. O. Box 68, Hobbs, NM 88240		10. Field and Pool, or Wildcat North Anderson Ranch Wfcamp	
4. Location of Well UNIT LETTER <u>A</u> LOCATED <u>1320</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>3</u> TWP. <u>16-S</u> REC. <u>32-E</u> NMPM		12. County Lea	
19. Proposed Depth 10,500'		19A. Formation Wolfcamp	
20. Rotary or C.T. rotary		21. Approx. Date Work will start on or before 5-5-84	
21A. Kind & Status Plug. Bond Blanket-on-file		21B. Drilling Contractor N/A	
22. Elevations (Show whether DH, NT, etc.) 4318.3' GL		23. APPROVED BY Blanket-on-file	

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#	425'	circulate	surface
11" or 12-1/4"	8-5/8"	24#, 32#	4150'	tie back to 13-3/8"	425'
7-7/8"	5-1/2"	17#, 15.5#, 17#	10500'	tieback to 500' above Wolfcamp	8500'

Propose to drill and equip well in the Wolfcamp formation. After reaching TD, logs will be run and evaluated. Perforate and/or stimulate as necessary in attempting commercial production.

Mud Program: 0 - 425 Native fresh water.
425 - 4150' Saturated brine-minimum properties for safe hole.
4150 - TD Cut brine-minimum properties. Convert to mud system if necessary.

Unorthodox location and non standard proration unit approved by Division Order No. R-7481

BOP Diagram attached.

O+5-NMOCD, H 1-J. R. Barnett, HOU Rm. 21.156 1-F. J. Nash, HOU Rm. 4.206 1-GCC

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.

Signed Gary C. Clark Title Assist. Admin. Analyst Date 4-16-84

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE APR 18 1984

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 10/18/84
UNLESS DRILLING UNDERWAY