

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)

30.025-03039

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☐ RE-ENTER ☐ DEEPEN ☒ PLUG BACK ☐

b. Type of Well:

OIL WELL ☒ GAS WELL ☐ OTHER ☐

SINGLE ZONE ☒

MULTIPLE ZONE ☐

7. Lease Name or Unit Agreement Name

GEORGE MCGONAGILL

2. Name of Operator

PENROC OIL CORPORATION

8. Well No.

1

3. Address of Operator

P.O. Box 5970, HOBBS, NM 88241

9. Pool name or Wildcat

WILDCAT

4. Well Location

Unit Letter A : 330 Feet From The NORTH Line and 990 Feet From The EAST Line

Section 2 Township 18 S Range 35 E NMPM LEA County

10. Proposed Depth

8550'

11. Formation

DRINKARD

12. Rotary or C.T.

WORKOVER RIG

13. Elevations (Show whether DF, RT, GR, etc.)

3892' GR

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

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16. Approx. Date Work will start

FEBRUARY 9, 1994

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17"	13 3/8"	48#	320'	330'	surface
11"	8 5/8"	24# 32#	3499'	1365'	surface
7 7/8"	5 1/2"	15# 17#	9259'	700'	

Run workover rig. Install well head equip. Pull and lay down rods & pump. Run BOP. Pull & Lay down tag. Tally & pick up 4 3/4" full gauge bit. BS & 2 7/8" N-80 tubing. Circulate hole & tag CIBP @ 4875'. TDH & Squeeze San Andres perms: 4790' - 4846'. WOC. Drill out cement & CIBP below 5100' +. Resume test perf. 4790 - 4846' & old squeeze @ 5060' - 68'. If necessary, squeeze "old" perms - circulate hole clean perforate 2 spf from 8065 - 8143'. Acidize, swab & if necessary acidize w/ larger acid job. Put on production.

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.

SIGNATURE

[Signature]

TITLE

President

DATE

2/7/94

TYPE OR PRINT NAME

M. F. (Merch) Merchant

TELEPHONE NO.

(505) 397-3554

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY

DISTRICT I

TITLE

DISTRICT SUPERVISOR

DATE

FEB 10 1994

CONDITIONS OF APPROVAL, IF ANY: