

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

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

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

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)

30-025-23900

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

E-1479

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

SOUTH VACUUM "26"

2. Name of Operator

V-F PETROLEUM INC.

8. Well No.

2

3. Address of Operator

ONE MARIENFELD PLACE, SUITE 580 MIDLAND, TX 79701

9. Pool name or Wildcat

WILDCAT

4. Well Location

Unit Letter L : 1980 Feet From The SOUTH Line and 710 Feet From The WEST Line

Section 26

Township 18S

Range 35E

NMPM LEA

County

10. Proposed Depth

6900'

11. Formation

DELAWARE

12. Rotary or C.T.

N/A

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

3877' GR

14. Kind & Status Plug Bond

BLANKET/CURRENT

15. Drilling Contractor

16. Approx. Date Work will start

1/1/91

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15"	11 3/4"	42#	351'	350	surface
11"	8 5/8"	24# & 32#	3810'	400	2500'
7 7/8"	5 1/2"	15.5# & 17#	11700'	400	9400'
7 7/8"	5 1/2"	15.5# & 17#	RE-CEMENT	500	5000'

PRESENT PERFORATIONS - 11558'-11664'

PROPOSAL:

1. SET CIBP @ 11400'. DUMP 20' CEMENT ON TOP OF PLUG.
2. TEST 5 1/2" CASING TO 2000# P.S.I.
3. PERFORATE 5 1/2" CASING @ 6900'.
4. BREAK CIRCULATION THROUGH 5 1/2" CASING.
5. SET PERMANENT CEMENT RETAINER @ 6800'.
6. CEMENT 5 1/2" CASING WITH SUFFICIENT VOLUME TO BRING CEMENT TOP TO 5000'.
7. WOC. PREPARE FOR COMPLETION IN DELAWARE ZONE 5800'-6800'.

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 Kenneth E. Stull TITLE PRODUCTION TECHNICIAN DATE 11/29/90

TYPE OR PRINT NAME KENNETH E. STULL TELEPHONE NO. 683-3344

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

DEC 1 2 1990

Workover