e						
NU OF LOI LES RECEIVED						
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION	Birm -itil -				
SANTAFE		Revised 1-1-65				
FILE		A. Indicates Type - Cleaner				
U.5.G.S.		CTATE X				
LAND OFFICE		Saultates Call & Gen Glerates (1).				
OPERATOR		К 5001				
APPLICATION FOR P	<u>X////////////////////////////////////</u>					
1a. Type of Work		7. Unit Agreement Name				
	DEEPEN PLUG BACK					
b. Type of Well		8, Furn or Lease Hame				
	HER ZONE ZONE	UNION-STATE COM.				
2. Name of Operator		9. Well No.				
HILLIARD OIL & GAS, INC	•	1				
3. Address of Cherator	10. Field and Pool, or Wildon					
906 Building of the Sou	E-K Bone Spring					
4. Location of Well UNIT LETTERD	LOCATED 660 FEET FROM THE NORTH					
AND 660 FEET FROM THE WE	St LINE OF SEC. 32 TWP. 18-S RGE. 34-E NMPM					
λ1111111111111111111111		12. s'ounty				
		Lea				
	19. Proposed Depth 19A. Formatio					
		pring Rotary				
21. Elevations (Show whether DF, RT; etc.)	21A. Kind & Status Plug, Bond 21B. Drilling Contractor	22. Approx. Date Work will start				
3901' GR	Blanket - in effect KKA Drilling Co.	March 28, 1975				
23. 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#	350'	370 sx	Surface
	8-5/8"	24 & 32#	5150'	500 sx	2750'
7-7/8''	4-1/2"	11.60#	9800'	500 sx	7800'

We propose to drill a 9800' Bone Spring test at this location as follows:

- 1. Drill 17-1/2" hole to 350'±. Set 13-3/8" csg. & cement to surface.
- Drill 11" hole to 5130'± (into top of San Andres). Set 8-5/8" csg. & cement back to 2750'.
- 3. Drill 7-7/8" hole to TD of 9800'±.
- 4. DST all significant shows & run open hole logs.
- 5. Set $4\frac{1}{2}$ liner from 5000'± to 9800'±. Cement bottom 2000'.
- 6. In the event of dry hole, well will be plugged as per Commission requirements.
- 7. BOP's will be installed on each string of casing and will be pressure tested. BOP's will be operated & checked daily.

6-17-75 و به دیک

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUC-TIVE 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 Cart Consider Title Manager of Operations	Date 3-13-75
(This space for State Use) APPROVED BY	DATE

RECEIVED

LIAF. 1 . 1875

L.L CONSLEVAL SHE COMM. HOBDS, N. H.