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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.
538055

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name State DR	
2. Name of Operator Amoco Production Company		9. Well No. 2	
3. Address of Operator P. O. Drawer A, Levelland, TX 79336		10. Field and Pool, or Without Und. Lusk Wolfcamp	
4. Location of Well UNIT LETTER H LOCATED 1650 FEET FROM THE North LINE AND 990 FEET FROM THE East LINE OF SEC. 16 TWP. 19-S RGE. 32-E NMPM		12. County Lea	
11. Proposed Depth 11,000		19A. Formation Wolfcamp	20. Rotary or C.T. Rotary
21. Elevations (show whether DF, RI, etc.) 3623.1	21A. Kind & Status Plug. Bond Blanket on File	21B. Drilling Contractor MGF #23	22. Approx. Date Work will start April 12, 1978

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#	400	Circulate	Surface
12-1/4"	8-5/8"	24#-32#	4,100	Circulate	Surface
8-3/4"	5-1/2"	17#-20#	11,000	Sufficient to tie back to	8-5/8"

Propose to drill and equip Wolfcamp well at 11,000 ft. Attempt completion by perforating and stimulating as necessary. In the event the Wolfcamp is non commercial will attempt completion in Bone Springs. NMOCC approval will be obtained for this after Wolfcamp is tested.

Mud Program: 0' - 400' - Native mud x fresh water
400' - 4,100' - Native mud x brine water
4,100' - 11,000' - Commercial mud & cut brine water to maintain safe hole conditions

BOP Program is attached.

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 Ray W. Cox Title Administrative Supervisor Date 4-3-78
(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT 1 DATE APR 5 1978

CONDITIONS OF APPROVAL, IF ANY:

0 + 4 - NMOCC-H, 1-Div. 1-Susp., 1-RC

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APR 4 - 1978

OIL CONSERVATION COMM,
HOBBS, N. M.