

SUBMIT IN TRIPlicate*
(Other instructions
reverse side)Form approved.
Budget Bureau No. 42-R1425.UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐GAS
WELL ☒OTHER ☐SINGLE
ZONE ☐MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

INEXCO OIL COMPANY

3. ADDRESS OF OPERATOR

1100 Milam Bldg. Suite 1900, Houston, TX 77002

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)

At surface

SW 1/4-NW 1/4 Sec 7-T19S-R33E

At proposed prod. zone

1980' FNL & 660' FWL

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

From Hobbs, NM-32 miles West-9 North-6 East-1 North

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(Also to nearest drlg. unit line, if any)

660'

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

3960'

16. NO. OF ACRES IN LEASE

324.65

19. PROPOSED DEPTH

14,000'

17. NO. OF ACRES ASSIGNED

TO THIS WELL

328.84

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3659.4'

22. APPROX. DATE WORK WILL START*

10/15/78

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17-1/2"	13-3/8"	40#	+ 500	To Surface
12-1/4"	8-5/8"	24-28#	+ 5100	To Surface
7-7/8"	4-1/2"	11.60#	Thru deepest pay	350 Sacks

(See Attachment "A")

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. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED

R. T. Foster
R. T. FosterTITLE Drilling AdministratorDATE 9/12/78

(This space for Federal or State office use)

PERMIT NO. _____

APPROVAL DATE

APPROVED
AS AMENDED
DEC 22 1978

APPROVED BY _____

TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

ACTING DISTRICT ENGINEER

*See Instructions On Reverse Side