

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)
30-025-28083

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
SWD-119

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 ☐ SWD ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☒

7. Lease Name or Unit Agreement Name

STATE "AJ"

2. Name of Operator

ALLIANCE CORPORATION

8. Well No.

#1

3. Address of Operator

P.O. Box 564, Lovington, New Mexico 88260-0564

9. Pool name or Wildcat

Devonian

4. Well Location

Unit Letter G : 2310 Feet From The North Line and 2310 Feet From The East Line

Section 33 Township 18S Range 36E NMPM LEA County

10. Proposed Depth

12,600

11. Formation

Devonian

12. Rotary or C.T.

rotary

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

3,806 GR

14. Kind & Status Plug Bond

15. Drilling Contractor

16. Approx. Date Work will start

17. 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#	373	400 sx	surface
12 1/4	8 5/8	32# & 24#	5000	23000	surface
7 5/8	5 1/2	20# & 17#	121000	250	11100

The subject well is currently approved for disposal from 5000' to 12164' by authority of Oil Conservation Division Order R-8166.

Due to the depth of the involved open hole, prudence indicates the well should be cased at least to the top of the Devonian formation at 12068'.

We request administrative approval to deepen the well to 12600ft. If the Devonian formation is capable of accepting water in sufficient volume it will be utilized as the disposal interval and the cement behind the 5 1/2" casing will be staged back to the surface.

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 Donald M. Harrod TITLE President, Alliance Corp DATE 24 July 1992

TYPE OR PRINT NAME Donald M. Harrod

TELEPHONE NO. 396-6862

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JUL 27 '92