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5A. Indicate Type of Lease
STATE ☒ FEE ☐
5. State Oil & Gas Lease No.
L-3674

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name
b. Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name State HQ
2. Name of Operator AMOCO PRODUCTION COMPANY		9. Well No. 5
3. Address of Operator P. O. Box 68, Hobbs, NM 88240		10. Oil Pool or Wildcat Wolfcamp
4. Location of Well UNIT LETTER <u>J</u> LOCATED <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>26</u> TWP. <u>18</u> RGE. <u>34</u> NMPM		12. County Lea
19. Proposed Depth 10666		19A. Formation Wolfcamp
20. Rotary or C.T.		
21. Elevations (show whether Dr, RT, etc.) 3995	21A. Kind & Status Plug. Bond	21B. Drilling Contractor
22. Approx. Date Work will start n/a		

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	54.5#	318	375 sx	Surface
11	8-5/8	24	4009	1750 sx	
7-7/8	5-1/2	17	10896	650 sx	

Propose to deepen subject well and recompleate to wolfcamp formation:

Hot oil well prior to rig move on. MI and RUSU. Kill well with 2% KCL fresh water. BHP appx. 50-100#. POH with rods and pump. RIH with cement retainer and set at 9000. Cement squeeze with 150 sacks of class H with low fluid loss additive. 150 sacks of class H with 4#/sx of tuff plug and 100 sacks of class H neat. Drill out cement and pressure test the squeeze at 9350 and TD. Run bit to 10750 to ensure hole is clean. Perforate 10666-10700 with 4 JSPF and 90° phasing with 3-1/8" or 3-3/8" hollow carrier. RIH with packer and set at 10600. Run GR/temp log. Acidize the Wolfcamp with 5000 gal of 15% HCL with 10 gal of WA-212 and 5 gal of WA-211 and 100 gal of Acetic acid with 200# of citric acid. Pump at 5-6 BPM and add 2 ball sealers per bbl of acid until 200 have been dropped. Do not exceed pressure rating of tubulars of packer. Tag acid with RA. Run post acid GR/temp log. Swab and evaluate results.

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 Steve Brownlee Title Admin. Analyst Date 3-25-87

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAR 27 1987

RECEIVED
MAR 26 1031
CCD
ADDRESS OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section

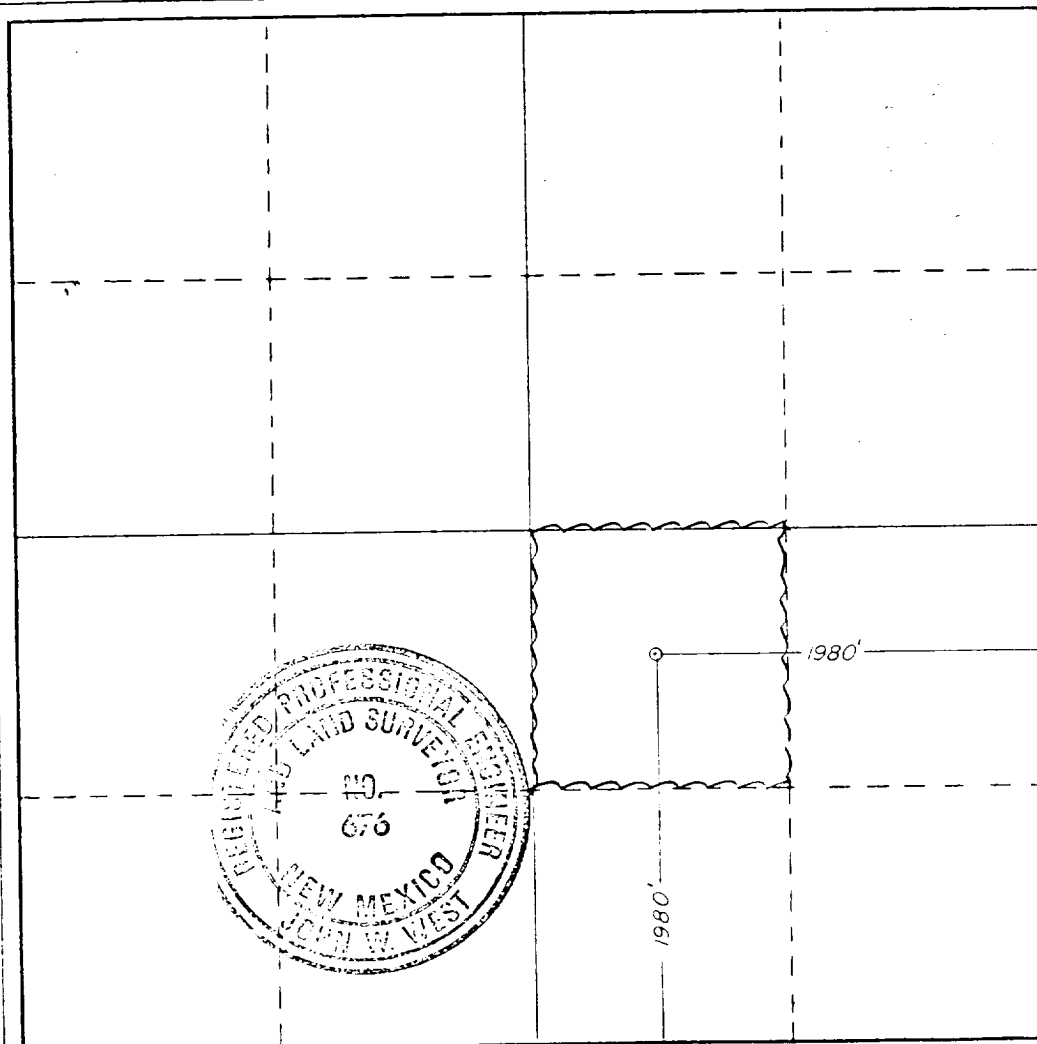
Operator AMOCO PRODUCTION CO.			Lease STATE "HQ"		Well No. 5
Post Letter J	Section 26	Township 18S	Range 34E	County LEA	
Actual Footage Location of Well:					
1980 feet from the SOUTH line and		1980 feet from the EAST line			
Ground Level Elev. 3979.6	Producing Formation Wolfcamp	Pool Airstrip Wolfcamp	Dedicated Acreage: 40 Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name *Mary C. Clark*
Position Assist. Admin. Analyst
Company AMOCO PRODUCTION COMPANY

Date 2-28-84

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

2/25/84

Registered Professional Engineer and/or Land Surveyor

John W. West

Certificate No JOHN W. WEST, 676
RONALD J. EIDSON, 3239

330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500