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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

30-025-28217

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name	
DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		State Vacuum Unit	
2. Name of Operator ARCO Oil and Gas Company Division of Atlantic Richfield Company		9. Well No. 23	
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240		10. Field and Pool, or Wildcat Vacuum Grayburg SA	
4. Location of Well UNIT LETTER <u>J</u> LOCATED <u>1530</u> FEET FROM THE <u>South</u> LINE AND <u>2490</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>32</u> TWP. <u>17S</u> RGE. <u>34E</u> NMPM		12. County Lea	
19. Proposed Depth 4900'		19A. Formation San Andres	20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) 4073.2' GR	21A. Kind & Status Plug. Bond GCA #8	21B. Drilling Contractor Not selected	22. Approx. Date Work will start 5/23/83

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" OD	Cond Pipe	30'	2 1/2 yds Redi-mix	Surf
11"	8-5/8" OD	24# K-55	1570'	455	Surf
7-7/8"	5 1/2" OD	15.5# & 17# K-55	4900'	885	Surf

Propose to drill a 20 acre San Andres infill secondary recovery well to recover remaining oil reserves. Administrative approval for unorthodox location in accordance with Rule 104F of the Rules and Regulations has been submitted.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 12/1/83
UNLESS DRILLING UNDERWAY

NSL-1699

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 Robert P. Lawrence Title Drlg. Engr. Date 5/10/83

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAY 31 1983

RECEIVED
MAY 12 1983
O.C.D.
HOBBS OFFICE