

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

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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)

30-025-29541

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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 RECOMPLETION

SINGLE  
ZONE ☐

MULTIPLE  
ZONE ☐

7. Lease Name or Unit Agreement Name

Humble City ADH

2. Name of Operator

YATES PETROLEUM CORPORATION

8. Well No.

1

3. Address of Operator

105 South 4th St., Artesia, NM 88210

9. Pool name or Wildcat

Undesignated

4. Well Location

Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line

Section 11

Township 17S

Range 37E

NMPM

Lea

County

10. Proposed Depth

11903'

11. Formation

Yeso-San Andres

12. Rotary or C.T.

Reverse Unit

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

3741.1' GR

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

-

16. Approx. Date Work will start

When approved

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"	54.5#	445'	450 sx (in place)	
11"	8-5/8"	32#	4476'	1700 sx (in place)	
7-7/8"	5 1/2"	23#	11903'	2580 sx (in place)	

Propose to plugback by setting CIBP at 10550' and cap with cement. Plan to selectively perforate, treat and test the following intervals: (1) Blinberry (Yeso) 7804-12', and 7850-56'; (2) Paddock (Yeso) 7512-30'; (3) San Andres 6230-70'; (4) San Andres 5423-31', 5290-5305'.

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

*Juanita Goodlett*

TITLE

Production Supervisor

DATE

10-16-89

TYPE OR PRINT NAME

Juanita Goodlett

TELEPHONE NO. 505/748-1471

(This space for State Use)

OCT 18 1989

APPROVED BY

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

**RECEIVED**

**OCT 17 1989**

**OCD  
HOBBS OFFICE**