

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

30-025-31008

## 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

Chevron U.S.A. Inc.

## 3. ADDRESS OF OPERATOR

P.O. Box 670, Hobbs, NM 88240

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

At surface

1980' FSL &amp; 1980' FWL

At proposed prod. zone

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

## 10. DISTANCE FROM PROPOSED\*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(Also to nearest drlg. unit line, if any) 1980'

## 18. DISTANCE FROM PROPOSED LOCATION\*

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

N/A

## 16. NO. OF ACRES IN LEASE

320

## 19. PROPOSED DEPTH

13,700'

## 17. NO. OF ACRES ASSIGNED TO THIS WELL

320

## 20. ROTARY OR CABLE TOOLS

Rotary

## 22. APPROX. DATE WORK WILL START\*

9-1-90

## PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
14 3/4	11 3/4	42#	500'	500 sx Circ.
11	8 5/8	32#	5400'	2500 sx Circ.
7 7/8	5 1/2	17,20 & 23#	13700'	1200 sx Tie into 8 5/8"

BOP EQUIPMENT 5000 PSI DOUBLE RAM W/ANNULAR PREVENTER HYDRAULICALLY OPERATED  
(SEE ATTACHED DRAWING)

## MUD PROGRAM

	WT	VIS
0 TO 500' FW SPUD MUD	8.4-9.5	28-36
500 TO 5400' BW	10	28-30
5400 TO 8500' FW W/GEL SWEEPS	8.4-9.0	28-32
8500 TO 12400 CBW GEL STARCH	9.0-9.6	32-34
12400 TO TD CBW POLYMER KCL	9.0-11.5	32-45
BAUTE AS REQUIRED		

## WATER LOSS

NC  
NC  
NC  
AS NEEDED  
AS NEEDED

RECEIVED

AUG 2 11 29 AM '90

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

TITLE Div. Drlg. Mgr.

DATE 7-16-90

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

APPROVAL SUBJECT TO  
GENERAL REQUIREMENTS AND  
SPECIAL REGULATIONS  
ENACTED

\*See Instructions On Reverse Side

**RECEIVED**

**SEP 14 1990**

**OCD  
NCEBS OFFICE**

Submit to Appropriate  
District Office  
State Lease - 4 copies  
Fee Lease - 3 copies

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
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

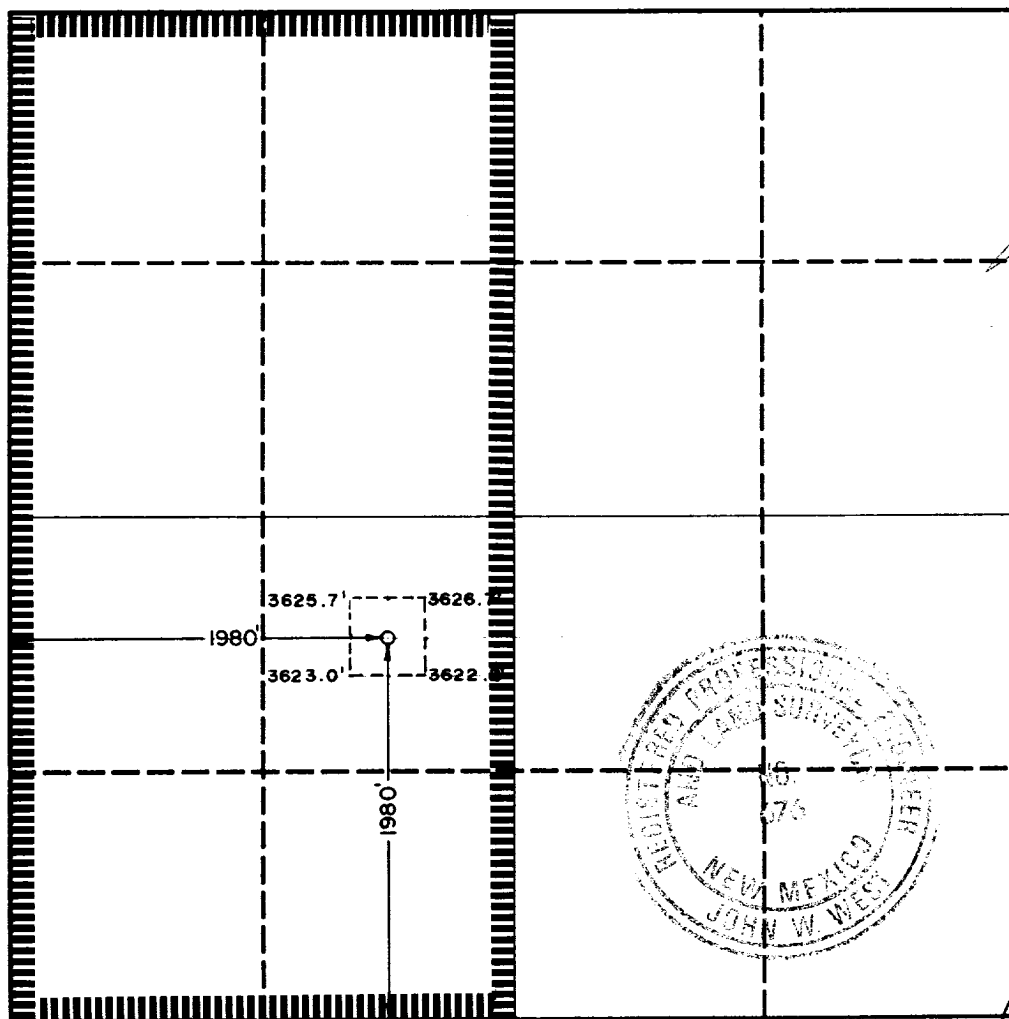
DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator CHEVRON USA, INC			Lease LOWELL FEDERAL		Well No. 1
Unit Letter K	Section 15	Township 19 SOUTH	Range 33 EAST	County LEA	NMPM
Actual Footage Location of Well: 1980 feet from the south line and 1980 feet from the west line					
Ground level Elev. 3622.7'	Producing Formation Morrow		Pool North-Maduro <i>Gem Morrow</i>	Dedicated Acreage: 320 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 interest 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 interest, has been approved by the Division.



OPERATOR CERTIFICATION

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

Signature *[Signature]*  
Printed Name  
R. C. Smith  
Position  
Div. Drlg. Mgr.  
Company  
Chevron U.S.A. Inc.  
Date  
7-20-90

SURVEYOR CERTIFICATION

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  
July 12, 1990  
Signature & Seal of  
Professional Surveyor

*[Signature]*  
Certificate No. JOHN W. WEST, 676  
RONALD J. EIDSON, 3239

16-8-1 8221

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