Submit to Appropriate District Office State Lease - 6 copies

**SIZE OF HOLE** 12.25"

7.875"

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-101 Revised 1-1-89

16. Approx. Date Work will start August 30, 1993

**EST. TOP** 

Surface

Surface

Fee Lease -- 5 copies OIL CONSERVATION DIVISION <u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240 API NO. (assigned by OCD on New Wells) P.O. Box 2088 3D-025-32196 Santa Fe, New Mexico 87504-2088 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATE FEE X DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 6. State Oil & Gas Lease No. APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK In. Type of Work: 7. Lease Name or Unit Agreement Name DRILL X RE-ENTER DEEPEN PLUG BACK b. Type of Well: MET X GAS WELL OTHER SINGLE ZONE MULTELE X Record 20NB 2. Name of Operator 8. Well No. Amtex Energy, Inc. 3. Address of Operator 9. Pool name or Wildcat P. O. Box 3418, Midland, TX 79702 Pearl-San Andres 4. Well Location : 760 Unit Letter Feet From The South 2080 Line and Feet From The West Line 26 198 35E Township Range Lea County 10. Proposed Depth 11. Formation 12. Rotary or C.T. 5,500' San Andres Rotary 13. Elevations (Show whather DF, RT, GR, etc.) 3699.0 GR 14. Kind & Status Plug. Bond 15. Drilling Contractor CapStar Drilling

Amtex Energy, Inc. proposes to drill to a depth sufficient to test the San Andres formation for oil. If productive, 5-1/2" casing will be cemented at TD. If non-productive, the well will be plugged and abandoned in a manner consistent with State of New Mexico regulations. Blowout preventer schematic is attached as Attachment 1.

PROPOSED CASING AND CEMENT PROGRAM

350'

5,500'

SETTING DEPTH | SACKS OF CEMENT

220sx Class"C"

600sx light +

400sx "C"

Cash Bond

24#

15.5#

WEIGHT PER FOOT

SIZE OF CASING

8.625"

5.50"

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO 2008L GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.	O DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT FROD	UCTIVE ZONE AND PROPOSED NEW PRODUCTIVE
I hereby certify that the information above is true and complete to the best of my knowle	rden and helief	
SIGNATURE William J. Savage	President	BATE 8/19/93
TYPEOR PRINT NAME William J. Savage		(915) 686-0847
		TELEPHONE NO.
(This space for State Use)  ORIGINAL SIGNED BY JERRY SEXTON		
APPROVED BY DISTRICT I SUPERVISOR	mle	DATE AUG 2 4 1993
CONDITIONS OF APPROVAL, IF ANY:		