

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)

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-2317

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 ☐

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

VACUUM GLORIETA WEST UNIT

2. Name of Operator

TEXACO EXPLORATION AND PRODUCTION INC.

8. Well No.

98

3. Address of Operator

P. O. Box 3109, Midland, Texas 79702

9. Pool name or Wildcat

VACUUM GLORIETA

4. Well Location

Unit Letter P : 937 Feet From The SOUTH Line and 532 Feet From The EAST Line

Section 35 Township 17-SOUTH Range 34-EAST NMPM LEA County

10. Proposed Depth

6269'

11. Formation

GLORIETA/PADDOCK

12. Rotary or C.T.

ROTARY

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

GR-4007'

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

16. Approx. Date Work will start

NOVEMBER 1, 1993

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11	8 5/8	24#	1500'	650	SURFACE
7 7/8	5 1/2	15.5#	6269'	1450	SURFACE

CEMENTING PROGRAM:

SURFACE CASING - 500 SX CLASS C w/ 4% GEL & 2% Cacl2 (13.5ppg, 1.74cf/s, 9.1gw/s). F/B 150 SX CLASS C w/ 2% Cacl2 (14.8ppg, 1.34cf/s, 6.3gw/s).

PRODUCTION CASING - 1250 SX 35/65 POZ CLASS H w/ 6% GEL, 5% SALT & 1/4# FLOCELE (12.8ppg, 1.94cf/s, 10.4gw/s). F/B 200 SX CLASS H (15.6ppg, 1.18cf/s, 5.2gw/s).

PHILLIPS OPERATES WELLS IN THIS QUARTER QUARTER SECTION AND HAVE BEEN FURNISHED A COPY OF THIS APPLICATION.

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 C. P. Basham / cwh TITLE DRILLING OPERATIONS MANAGER DATE 10-12-93

TYPE OR PRINT NAME C. P. BASHAM

TELEPHONE NO. (915) 688-4620

(This space for State Use) **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OCT 14 1993