

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Feb 13 11 15 AM '91
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1. TYPE OF WORK
a. TYPE OF WELL
OIL WELL ☒ GAS WELL ☐ OTHER ☒ DRILL ☐ DEEPEN ☒ PLUG BACK ☐
b. TYPE OF WELL
OIL WELL ☒ GAS WELL ☐ OTHER ☒
2. NAME OF OPERATOR
CHEVRON USA INC.
3. ADDRESS OF OPERATOR
P.O. Box 1150 Midland TX 79702
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)
1650 FNL + 1650 FEL
At proposed prod. zone
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
4.5 miles SE of Monument
10. DISTANCE FROM PROPOSED LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT.
(Also to nearest drilg. unit line, if any)
18. DISTANCE FROM PROPOSED LOCATION TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
21. ELEVATIONS (Show whether DF, RT, GR, etc.)
3567
16. NO. OF ACRES IN LEASE
3000
17. NO. OF ACRES ASSIGNED TO THIS WELL
40
20. ROTARY OR CABLE TOOLS
Rotary
22. APPROX. DATE WORK WILL START*
3-1-91

5. LEASE DESIGNATION AND SERIAL NO.
LC-031622-A
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
EUNICE MONUMENT South Unit-B
9. WELL NO.
877
10. FIELD AND POOL, OR WILDCAT
EUNICE MONUMENT G6/84
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC 14 T20 R36E
12. COUNTY OR PARISH
LEA
13. STATE
NM

Existing PROPOSED CASING AND CEMENTING PROGRAM						
HOLE SIZE	CASING SIZE	WEIGHT/FOOT	GRADE	THREAD TYPE	SETTING DEPTH	QUANTITY OF CEMENT
	10 3/4				237	225
	7 5/8	26.4			1130	425
	5 1/2	17			3759	425

1. S92 Existing PERFS DEEPEN to 4500' w/6 1/4" bit. SELECTIVELY PERF NEW ZONE STIMULATE AS NEEDED.
2. 3000 psi BOPE
3. STARCH/BRINE MUD SYSTEM.
4. WELL NAME CHANGED FROM SANDERSON 'A' #13 to EMSUB #887 WIN
5. Api. # 30-025-04267

24. 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.

SIGNED E.O. Noherty TITLE T.A. Delg DATE 2/11/91
(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE 2-22-91
CONDITIONS OF APPROVAL, IF ANY: _____