

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK DRILL ☐ DEEPEN ☒ PLUG BACK ☐		5. LEASE DESIGNATION AND SERIAL NO.	
b. TYPE OF WELL OIL WELL ☒ GAS WELL ☐ OTHER ☐		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR CHEVRON USA INC		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR P.O. Box 1150 MIDLAND, TX 79702 ATTN: ED DOHERTY Rm 4111		8. FARM OR LEASE NAME EUNICE MONUMENT Unit-B	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.) At surface: 330 FHL + 660 FWL At proposed prod. zone: GRAYBURG		9. WELL NO. 873	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* ± 4.5 MILES SE of Monument		10. FIELD AND POOL, OR WILDCAT EUNICE MONUMENT GR 1A	
15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA SEC 14 T20S R36E	
16. NO. OF ACRES IN LEASE 3000		12. COUNTY OR PARISH LEA	
17. NO. OF ACRES ASSIGNED TO THIS WELL 40		13. STATE NEW MEXICO	
18. PROPOSED DEPTH 4500		20. ROTARY OR CABLE TOOLS Rotary	
21. ELEVATIONS (Show whether DF, RT, GR, etc.) 3575 GR		22. APPROX. DATE WORK WILL START* 3-15-91	

Existing PROPOSED CASING AND CEMENTING PROGRAM						
HOLE SIZE	CASING SIZE	WEIGHT/FOOT	GRADE	THREAD TYPE	SETTING DEPTH	QUANTITY OF CEMENT
	10 3/4				275	225
	7 5/8	26.4			1241	425
	5 1/2	17			3751	425

- 1.) DEEPEN WELL from 3822' to ± 4500' w/6 1/4" bit.
- 2.) 3000 PSI BOPE.
- 3.) STARCH/BRINE MUD SYS.
- 4.) WELL NAME CHANGE FROM SANDERSON AB-14 #1 to Emsub # 873.
- 5.) API # 30-025-04276.

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 DRILLING T.A. DATE 2/25/91
(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____
APPROVED BY _____ TITLE _____ DATE 3 5 91
CONDITIONS OF APPROVAL, IF ANY: _____

*See Instructions On Reverse Side