

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

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

API NO. (assigned by OCD on New Wells)
30-025-05913

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
NONE

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

BERTHA BARBER

2. Name of Operator

Marathon Oil Company

8. Well No.

8

3. Address of Operator

P.O. Box 552 Midland, Tx. 79702

9. Pool name or Wildcat

EUMONT (Y, SR, QN)

4. Well Location

Unit Letter E : 1980 Feet From The NORTH Line and 660 Feet From The WEST Line

Section 5

Township 20S

Range 37E

NMPM LEA

County

10. Proposed Depth

3560

11. Formation

Y, SR, QN

12. Rotary or C.T.

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

GL: 3558 KB: 3569

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

16. Approx. Date Work will start

JAN. 94

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
NO CHANGE--	SEE ORIGINAL	COMPLETION	REPORT		

MARATHON OIL COMPANY IS PROPOSING TO RECOMPLETE THIS WELL TO THE EUMONT GAS POOL FROM THE GRAYBURG SAN ANDRES USING THE PROCEDURE DETAILED BELOW. MIRU PU. NO WELL HEAD. NU BOP. TEST 7" CSG TO 500 PSI. POOH W/TBG & PRODUCTION PKR. SET CBP @ 3580' W/2 SX CMT ON TOP. PERF QUEEN PENROSE 3137-3160, 3227-3320, 3340-3390 1 JSPF. SET BAKER LOK-SET ON 2 7/8" TBG @ 3100'. ACIDIZE 3137-3390 W/2000 GALS 15% HCL. TURN WELL TO TEST.

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 Thomas M. Price TITLE ADV. ENGINEERING TECH. DATE 12-20-93

TYPE OR PRINT NAME THOMAS M. PRICE

TELEPHONE NO. 915/682-162

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE DEC 23 1993

CONDITIONS OF APPROVAL, IF ANY: