

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

API NO. (assigned by OCD on New Wells)

30-025-31611

5. Indicate Type of Lease:

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

A-1375

7. Lease Name or Unit Agreement Name

STATE "A"

8. Well No.

7

9. Pool name or Wildcat

EUMONT Y-SR-QN

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 ☐

2. Name of Operator

DAVID H. ARRINGTON OIL & GAS, INC.

3. Address of Operator

P.O. BOX 2071, MIDLAND, TX. 79702

4. Well Location

Unit Letter G : 1980 Feet From The North Line and 1650 Feet From The East Line

2 Section 2 20-South Township 36 East Range 36 East NMPM Lea County

10. Proposed Depth

3600'

11. Formation Yates

7-Rivers, Queen

12. Rotary or C.T.

Rotary

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

3588 GR

14. Kind & Status Plug. Bond

Plugging-Active

15. Drilling Contractor

Rod-Ric

16. Approx. Date Work will start

6/15/92

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4	8 5/8"	24#	460	300	Surface
7 7/8	5 1/2"	15.5#	3600	400	1250 ft.

1. Drill 12 1/4 hole to about 460' with fresh water mud (50' into Red Bed).
2. Run 8 5/8" 24# J-55 ST&C casing to 460' and cement to surface.
3. WOC 12 Hrs. Test casing and series 900 BOP (Double Ram Hydraulic with choke manifold and kill line).
4. Drill 7 7/8" hole to approximately 3600' with brine water mud.
5. Log hole. Run 5 1/2" 15.5# J-55, LT&C casing to 3600' and cement to above 1250': Hang casing, Nipple down BOP.
6. Release drilling rig.

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

David H. Arrington

TITLE

President

DATE

5/27/92

TYPE OR PRINT NAME

David H. Arrington

TELEPHONE NO.

915682-6685

(This space for State Use)

APPROVED BY

TITLE

DATE

JUN 02 '92

CONDITIONS OF APPROVAL, IF ANY:

Expires 6 Months From Approval