

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

DEC 7 12 55 PM '69

5A. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name Battery 2 Humble-Laughlin	
9. Well No. 2	
10. Field and Pool, or Withhold Monument Grayburg San Andres	
12. County Lea	
19. Proposed Depth 4400	19A. Formation San Andres
20. Rotary or C.T. Reverse Unit	
21. Elevations (Show whether DF, RT, etc.) 3553 G.L.	21A. Kind & Status Plug. Bond
21B. Drilling Contractor DA&S Well Ser. Corp.	
22. Approx. Date Work will start 1-5-70	

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DRILL <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> PLUG BACK <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	
2. Name of Operator W. K. Byrom	
3. Address of Operator P. O. Box 147 - Hobbs, New Mexico 88240	
4. Location of Well UNIT LETTER <u>I</u> LOCATED <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>4</u> TWP. <u>20S</u> RGE. <u>37E</u> NMPM	
23. PROPOSED CASING AND CEMENT PROGRAM	

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
18"	16"	80	190'	50	
10"	8-5/8"	32	1264'	200	
8-1/4"	7"	24	3664	500	

We propose to deepen our #2 well from 3896' to 4400' to test the upper 500' of the San Andres formation.

We intend to core some of the better zones and if oil or gas is found, we will hang a 4 1/2" liner from the 7" production string. The present production zone is the Monument pay and is 98% water.

3-30-70

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.

Signed W. K. Byrom Title Geologist Date 12-29-69

APPROVED BY [Signature] TITLE [Signature] DATE DEC 30 1969

CONDITIONS OF APPROVAL, IF ANY: