

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK DRILL ☐ DEEPEN ☐ PLUG BACK ☒		5. LEASE DESIGNATION AND SERIAL NO. LC-032096(8)	
b. TYPE OF WELL OIL WELL ☒ GAS WELL ☐ OTHER ☐		7. UNIT AGREEMENT NAME NMFU	
2. NAME OF OPERATOR Continental Oil Company		8. FARM OR LEASE NAME Trickhart A-27	
3. ADDRESS OF OPERATOR Box 460, Hobbs, New Mexico 88240		9. WELL NO. 2	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.) At surface 1980' FNL & 1980' FWL of Sec. 27, T-21S, R-37E, in Lea County, N. Mex. At proposed prod. zone Same		10. FIELD AND POOL, OR WILDCAT Wanta, Abs	
14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* 1 mile NW of Emice		11. SEC., TWP., M., OR BLK. AND SURVEY OR AREA Sec. 27, T-21S, R-37E	
15. DISTANCE FROM PROPOSED LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest Crig. unit line, if any) 660 North		12. COUNTY OR PARISH 13. STATE Lea N. Mex.	
16. NO. OF ACRES IN LEASE 320		17. NO. OF ACRES ASSIGNED TO THIS WELL 40	
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT. 1300 W of NO. 10		19. PROPOSED DEPTH PB 7350	
20. ROTARY OR CABLE TOOLS -		21. APPROX. DATE WORK WILL START* 5-21-69	
22. ELEVATIONS (Show whether DF, RT, GR, etc.) 3417' DF		23. PROPOSED CASING AND CEMENTING PROGRAM	

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17 1/2	12 3/4	45	226'	200
12 1/4	9 5/8	32.2	2 425'	500
8 3/4	7	17	6572'	500
6 1/4	5 (liner)	14.87	6445' - 7540	140

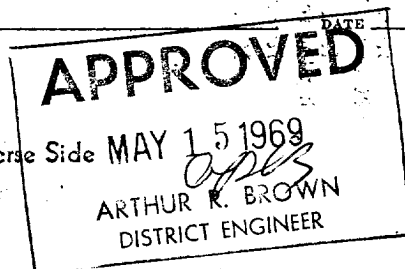
It is proposed to squeeze the Ellenburger perms from 7452' to 7526'. Place a cement retainer at approx. 7350 and perforate the wanta Abs from approx. 6865' to 7265'. Place well on production.

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.

24. SIGNED M. E. Gaskley TITLE Staff Supervisor DATE 5-14-69
 (This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____
 CONDITIONS OF APPROVAL, IF ANY:



*See Instructions On Reverse Side

*U.S.D.I. 5
 J. G. M. 2
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