Submit to Appropriate
District Office
State Lease – 6 copies
Fee Lease – 5 copies

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-101
Revised 1-1-89

API NO. (assigned by OCD on New Wells) 30-025-06851

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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: Eunice King

2. Name of Operator: Chevron U.S.A. Inc.

8. Well No.: 14

3. Address of Operator: P.O. Box 670, Hobbs, NM 88240

9. Pool name or Wildcat: Blinebry

4. Well Location
Unit Letter G : 1874 Feet From The North Line and 2086 Feet From The East Line

Section 28 Township 21S Range 37E NMPM Lea County

10. Proposed Depth	11. Formation	12. Rotary or C.T.

13. Elevations (Show whether DF, RT, GR, etc.)	14. Kind & Status Plug. Bond	15. Drilling Contractor	16. Approx. Date Work will start
3448			

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2	13 3/4	48#	290	300	Circ
12 1/4	9 5/8	36#	2850	1300	610'
8 3/4	7	23#	7664	700	3375'

PLUGBACK THE SUBJECT WELL FROM THE HARE SIMPSON TO THE BLINEBRY, SET CIBP @ 7300', CAP W/35' CMT, TST CSG & CIBP TO 500, PERF BLINEBRY F 5712-5922, TOTAL 16 HOLES, ACDZ W/4000 GAL, FRAC IS NEEDED, SWB TST, RETURN TO 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. 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 M. E. Akins 1/12/90 TITLE Staff Drlg. Engr. DATE 1-12-90

TYPE OR PRINT NAME M.E. Akins TELEPHONE NO. 393-4121

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE DATE JAN 16 1990

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval Date Unless ~~Drilling~~ Underway.
WAKNER