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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work Re-enter plugged & abandoned well and recomplete		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name H. T. Mattern (NCT-B)	
2. Name of Operator Gulf Oil Corporation		9. Well No. 13	
3. Address of Operator Box 670, Hobbs, N.M. 88240		10. Field and Pool, or Wildcat Emont Gas	
4. Location of Well UNIT LETTER J LOCATED 1980 FEET FROM THE south LINE 1980 FEET FROM THE east LINE OF SEC. 30 TWP. 21S RGE. 37E NMPM		12. County Lee	
19. Proposed Depth 3660'		19A. Formation Queen	
20. Rotary or C.T. Reverse unit		21. Elevations (Show whether DF, RT, etc.) 3490' GL	
21A. Kind & Status Plug. Bond Blanket		21B. Drilling Contractor ---	
22. Approx. Date Work will start June 29, 1970		23.	

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#	328'	175	
7-7/8"	4-1/2"	9.50#	3824'	335	

Drill out 50' cement plug, run tubing and circulate to clean hole to 3660'. Pressure test casing with 3000# for 30 minutes. Spot 1260 gallons gelled water followed by 1000 gallons 15% double inhibited acid at 3580'. Pull tubing. Perforate 4-1/2" casing w/2, 1/2" JHPF at 2884-86', 2967-69', 3204-06', 3256-58', 3418-20', 3536-38' and 3574-76'. Frac treat with 35,000 gallons gelled water with 2# SPG and RCMB sealers. Check for fill and clean out if necessary. Run tubing and packer set at approximately 2850'. Swab and 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.

Signed *[Signature]* Title **Area Production Manager** Date **6-25-70**

(This space for State Use)

APPROVED BY *[Signature]* TITLE **SUPERVISOR DISTRICT** DATE **JUN 26 1971**

CONDITIONS OF APPROVAL, IF ANY: **Non-Standard Proration Unit Order must be obtained before gas allowable will be assigned.**

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JUN 26 1970

OIL CONSERVATION COMM.
HOBBS, N. M.

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