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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		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Royalty Holding	
2. Name of Operator Kirby Exploration Company of Texas		9. Well No. 1- 8	
3. Address of Operator P. O. Box 1745, Houston, Texas 77251		10. Field and Pool, or Wildcat WANTZ ABO	
4. Location of Well UNIT LETTER B LOCATED 1980 FEET FROM THE East LINE AND 660 FEET FROM THE North LINE OF SEC. 25 TWP. 21S RGE. 37E NMPM		12. County Lea	
11. Proposed Depth 5829'-5945'		19A. Formation Abo	
21. Elevations (Show whether DE, RT, etc.) 3405.6 GR.		20. Rotary or C.T.	
21A. Kind & Status Plug. Bond \$50,000 Blanket		21B. Drilling Contractor. Pool Well Service	
22. Approx. Date Work will start 6-20-85			

23.

PROPOSED CASING AND CEMENT PROGRAM

* SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPT.	SACKS OF CEMENT	EST. TOP
12 1/4"	9 5/8"	36#	910'	330 sx	Circ
8 3/4"	7"	26# & 23#	7500'	785 sx	

1. TOOH w/ rods, pump, & tubing
2. TIH w/ CIBP & set at 6470'. Spot 35' cmt. on top of CIPB.
3. Spot 200g 10% MSA from 5945' - 5934'.
4. Perforate w/ 1JSPF (.40" holes) at 5829'-32', 5876'-79', 5894'-95', 5902', 5912'-13, 15', 20', 5944'-45' (17' & 17 holes)
5. Acidize w/2000g 15% NE-FE + 24 BAM sealers.
6. Swab to recover load.
7. Fracture treat w/40,000g X-linked gel + 60,000# 20-40 sand at 18 bpm.
8. Run tubing, rods, and pump and return to production as an ABO producer.

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 Prod. Administrator Date 6-10-85

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT SUPERVISOR

TITLE

DATE

JUN 12 1985

CONDITIONS OF APPROVAL, IF ANY: