SUBMIT IN TRIPLICATES (Other instruction

rorm approved. Budget Bureau No. 42-R1425.

D STATES

reverse si DEPARTMENT OF THE INTERIOR 5. LEASE DESIGNATION AND SERIAL NO. **GEOLOGICAL SURVEY** NM D557686 6. IF INDIAN, ALLOTTEE OR TRIBE NAME APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK 1a. TYPE OF WORK 7. UNIT AGREEMENT NAME DRILL 🗷 DEEPEN PLUG BACK b. TYPE OF WELL MULTIPLE ZONE OIL WELL GAS WELL SINGLE 2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY SEMU Burnens P. O. Box 460, Hobbs, N.M. 88240 94 10. FIELD AND POOL, OR WILDCAT AND SURVEY OR AREA 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*) 1830 FNL & 560 FWL of Sec. 23 At proposed prod. zone Sec. 23 7-30 R-37 E.

12. SOUNTY OF PARISH 18. STATE 14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE* Kri Ku 11 Mex 15. DISTANCE FROM PROPOSED* 17. NO. OF ACRES ASSIGNED TO THIS WELL 16. NO. OF ACRES IN LEASE PROPERTY OR LEASE LINE, FT.
(Also to nearest drig, unit line, if any) PROPOSED DEPTH 18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLE
OR APPLIED FOR, ON THIS LEAGE, FT. 20. ROTARY OR CABLE TOOLS 22/APPBOX, DATE WORK WILL START* 3750 21. ELEVATIONS (Show whether DF, RT, GR, etc.) PROPOSED CASING AND CEMENTING PROGRAM SIZE OF HOLE SIZE OF CASING WEIGHT PER FOOT SETTING DEPTH QUANTITY OF CEMENT 12/4" 20# 400 Circ - 210 Secks 83/5, Spec 3.750 275 Section 512, K-55 14 It is proposed to dull a stroight hale to a TO of 3,750' and complete us a bumont Juien you well. Mark brogram 0- 400' 8.5#- 9.0 "Sput must - 400'-3,750" 9.0 +- 10.0 Just bel See attacked for Blowout bounts broggam. Need appeared time oce of NSC perfore affect dele will be assigned IN ABOVE SPACE DESCRIBE PROFOSED 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. Division Office Manager (This space for Federal or State office use) APPROVAL DATE

PERMIT NO.

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: TITLE .