

COPY TO O. C. C.

Form 9-221 C
(Rev. 1963)SUBMIT IN TRIPlicate
(Other instructions on
reverse side)Form approved.
Budget Bureau No. 42-R1435.

30-025-24464

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

2. TYPE OF WELL

OIL
WELL ☒GAS
WELL ☐

OTHER

SINGLE
ZONE ☐MULTIPLE
ZONE ☐

3. NAME OF OPERATOR

WARTINDALE PETROLEUM CORPORATION

4. ADDRESS OF OPERATOR

Box 1955, Hobbs, NM 88240

5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

1880 FEL and ~~680~~ FSL of Section 19

At proposed prod. zone

660

6. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE

10 miles SW of Eunice, New Mexico

7. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST

PROPERTY OR LEASE LINE, FT.

(also to nearest orig. unit line, if any)

680

16. NO. OF ACRES IN LEASE

1640

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

8. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,

OR APPLIED FOR, ON THIS LEASE, FT.

1320'

19. PROPOSED DEPTH

3900'

20. ROTARY OR CABLE TOOLS

rotary

9. ELEVATIONS (Show whether DE, RT, GR, etc.)

3538.5

22. APPROX. DATE WORK WILL START*

upon completion

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/4	8 5/8	24#	400	250 sk circ
7 7/8	5 1/2	15.5#	3900	750 sk circ

See attachments for blowout preventor, mud program and complete details of operations.

RECEIVED

AUG 10 1979

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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 preventor program, if any.

SIGNED [Signature] TITLE Secretary-Treasurer

DATE August 8, 1979

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

