

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK RE ENTER
DRILL ☒ DEEPEN ☐ PLUG BACK ☐

b. TYPE OF WELL
OIL WELL ☐ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. NAME OF OPERATOR
CONTINENTAL OIL COMPANY

3. ADDRESS OF OPERATOR
P.O. Box 460, Hobbs, NM 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*
At surface
660' FSL 11380 FSL
At proposed prod. zone
SAME

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

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)

16. NO. OF ACRES IN LEASE

17. NO. OF ACRES ASSIGNED TO THIS WELL

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH
3924'

20. ROTARY OR CABLE TOOLS
RTY

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
3628' DF

22. APPROX. DATE WORK WILL START*
upon approval.

5. LEASE DESIGNATION AND SERIAL NO.
0179592C032099(a)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME
NMFLU

8. FARM OR LEASE NAME
Lockhart A-18

9. WELL NO.
2

10. FIELD AND POOL, OR WILDCAT
EUM. VATES TRVRS ON

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 18, T21S, R36E

12. COUNTY OR PARISH
LEA

13. STATE
NM.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
	10 3/4"	40#	336'	
	7 5/8"	26.4#	11654'	
	5 1/2"	17#	3837'	

It is proposed to RE ENTER THE SUBJECT well and complete as a Seven Rivers Queen gas well. The casing program indicated above is the present status and there will be no change. SEE ATTACHED FOR procedure and Surface Use Plan. Acreage is dedicated to a gas purchaser.

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JUN 12 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 preventer program, if any.

24. SIGNED John A. Butterfield TITLE Administrative Supervisor DATE MAY 10, 1979
(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

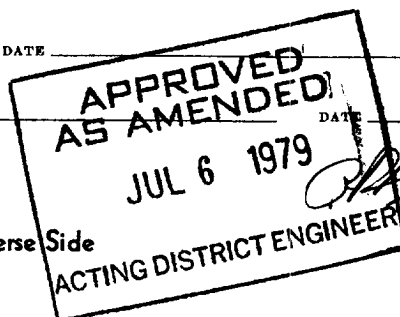
LISGS 6

NMFLU 4

JFBREL

FILE

*See Instructions On Reverse Side



100-100000-100000

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JUL 10 1970
O.C.D. HOBBS, OFFICE