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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-1511

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work	
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 checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	
2. Name of Operator	
Atlantic Richfield Company	
3. Address of Operator	
P. O. Box 1710, Hobbs, New Mexico 88240	
4. Location of Well	
UNIT LETTER C LOCATED 330 FEET FROM THE North LINE	
AND 2310 FEET FROM THE West LINE OF SEC. 19 TWP. 21S RGE. 36E NMPM	
19. Proposed Depth	
19A. Formation	
Eumont Queen Gas	
20. Rotary or C.T.	
WO Rig	
21. Elevations (Show whether DF, RT, etc.)	
3638' GR	
21A. Kind & Status Plug. Bond	
GCA #8	
21B. Drilling Contractor	
Not selected	
22. Approx. Date Work will start	
12/7/76	

7. Unit Agreement Name
8. Farm or Lease Name
State 176
9. Well No.
6
10. Field and Pool, or Wildcat
Eumont Yates 7RQ
12. County
Lea

23. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
No change in casing					

Propose to recomple to the Eumont Queen Gas zone & establish a 275 acre non-standard unit & simultaneously dedicate the State 176 #3. Propose to recomple in the following manner:

1. Rig up, install BOP.
2. Spot 950 gals 10% acetic acid 3200-3780', run GR-Compensated Neutron log w/collars 3000-3800'.
3. Perf Eumont Gas @ intervals as determined from CNL.
4. RIH w/trtg pkr, set above Eumont On Gas perfs & treat w/3000 gals 15% HCL-LSTNE acid w/iron agent. Swab test.
5. Frac perfs in 3 stages using ball sealers w/20,000 gals gelled 9# BW, 10,000 gals CO2, 108,000# sd. Clean out sd & swab test.
6. RIH w/completion assy & test for production.

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 \_\_\_\_\_ Title Dist. Drlg. Supt. Date 12/6/76

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE DEC 8 1976

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

DEC 7 1976

OIL CONSERVATION COMM.  
HOBBS, N. M.