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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.
BL-556

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> Salt Water OTHER Disposal Well		8. Farm or Lease Name	
2. Name of Operator		E-M-E SWD	
3. Address of Operator		9. Well No.	
Rice Engineering & Operating, Inc.		1-21	
4. Location of Well		10. Field and Pool, or Wildcat	
UNIT LETTER L LOCATED 440 FEET FROM THE West LINE		Eunice Monument	
AND 1520 FEET FROM THE South LINE OF SEC. 21 TWP. 21S RGE. 36E NMPM		12. County	
		Lea	
19. Proposed Depth		19A. Formation	20. Rotary or C.T.
5100'		San Andres	Rotary
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start
3589' G.L.	on file	B & L Drilling Co.	9-6-66

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	9-5/8" OD	32.3#	300'	250	circulated
8-3/4"	7" OD	20#	4500'	750	1100'

1. Drill 12-1/4" hole, set approximately 300'-9-5/8" OD casing and circulate cement.
2. WOC for 24 hours, install BOP and test surface casing.
3. Drill 8-1/4" hole w/saturated brine through salt section to casing point of approximately 4500' w/gel mud.
4. Run 7" OD casing @ 4500' cemented w/750 sax possolan cement, WOC 24 hours, run temperature survey and test 7" casing.
5. Drill 6-1/4" hole to TD of 5,100' and run Gamma Ray-Neutron Log.
6. Take gravity injection test, acidize if necessary, run 5-1/2" OD plastic-lined casing as tubing and install annular oil blanket.

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 W. G. Abbott Title Division Manager Date August 30, 1966

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: