

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease
STATE ☐ FEE ☒
5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name H. T. Mattern (NCT-C)	
2. Name of Operator Gulf Oil Corporation		9. Well No. 7	
3. Address of Operator Box 670, Hobbs, N.M. 88240		10. Field and Pool, or Wildcat Drinkard	
4. Location of Well UNIT LETTER J LOCATED 2130 FEET FROM THE south LINE AND 1980 FEET FROM THE east LINE OF SEC. 18 TWP. 21S RGE. 37E NMPM		12. County Lea	
19. Proposed Depth --		19A. Formation Blinebry	
20. Rotary or C.T. --		21. Elevations (Show whether DF, RT, etc.) 3502' GL	
21A. Kind & Status Plug. Bond Blanket		21B. Drilling Contractor --	
22. Approx. Date Work will start --			

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8-5/8"	24.0#	1295'	500	Circulate
7-7/8"	5-1/2"	15.5#	6772'	650	2350'.

Pull producing equipment. Run and set CIBP at approximately 6400, temporarily abandoning Drinkard zone. Test CIBP with 750#. Perforate 5 1/2" casing in the Blinebry intervals 5556-58', 5594-96', 5648-50', 5683-85', 5733-35', 5770-72' and 5848-50' with 2, 1/2" JHPF. Run treating equipment. Straddle and acidize each set of Blinebry perforations 5556-5850' with 200 gallons 15% inhibited iron stabilized HCl acid. Swab and/or flow back load. Frac treat Blinebry zone in 5 stages using 52,500 gallons gelled brine, 20,000# 100 mesh sand and 80,000# 20-40 sand. Pump 200 gallons 15% HCl acid between stages, diverting with 7/8" ball sealers between stages. Swab and/or flow back all load. Pull treating equipment. Run producing equipment. Swab well and clean up and place on production.

Well will be down hole commingled under Administrative Order No. DHC-253 at a later date.

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 H. S. Sikes, Jr. Title Area Engineer Date 9-18-78

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT 1 DATE SEP 19 1978
CONDITIONS OF APPROVAL, IF ANY: