Form 9-331 C
(May 1963)

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1425.

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK
DRILL [X] DEEPEN [ ] PLUG BACK [ ]

b. TYPE OF WELL
OIL WELL [ ] GAS WELL [X] OTHER SINGLE ZONE [X] MULTIPLE ZONE [ ]

2. NAME OF OPERATOR
Cleary Petroleum Corporation

3. ADDRESS OF OPERATOR
P. O. Drawer 2358 Midland, Texas 79701

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*)
At surface
660' FEL & 1980' FSL
At proposed prod. zone

5. LEASE DESIGNATION AND SERIAL NO.
NM 14791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
New Mexico ~~Federal~~ "C"

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Undesignated

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 4, T-21-S, R-32-E

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*
4 3/4 miles SE of Halfway, New Mexico

12. COUNTY OR PARISH: Lea
13. STATE: New Mexico

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
660'	2282.84	320
18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.	**19. PROPOSED DEPTH**	**20. ROTARY OR CABLE TOOLS**
2952	14200	Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)
3717 GR

22. APPROX. DATE WORK WILL START*
12-15-76

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17½	13 3/8"	48 & 54.5	470	650
12¼	9 5/8"	40,43.5,47,53.5	5600	3250
7 7/8	5 ½"	17 & 20	14200	675

See attached sheets for casing and cementing programs. The well will be drilled to a depth of 14,200 to test the Morrow sands. Dual 1500 series ram type blowout preventors and one Hydril will be used.

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 _____ TITLE Assistant District Manager DATE 11-24-76

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions On Reverse Side

Instructions

General: This form is designed for submitting proposals to perform certain well operations, as indicated, on all types of lands and leases for appropriate action by either a Federal or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

Item 1: If the proposal is to redrill to the same reservoir at a different subsurface location or to a new reservoir, use this form with appropriate notations. Consult applicable State or Federal regulations concerning subsequent work proposals or reports on the well.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 14: Needed only when location of well cannot readily be found by road from the land or lease description. A plat, or plats, separate or on this reverse side, showing the roads to, and the surveyed location of, the well, and any other required information, should be furnished when required by Federal or State agency offices.

Items 15 and 18: If well is to be, or has been directionally drilled, give distances for subsurface location of hole in any present or objective production zone.

Item 22: Consult applicable Federal or State regulations, or appropriate officials, concerning approval of the proposal before operations are started.

GPO 782-931

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR
Cleary Petroleum Corporation

3. ADDRESS OF OPERATOR
P. O. Drawer 2358, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
660' FEL & 1980' FSL

5. LEASE DESIGNATION AND SERIAL NO.
NM-14791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
---

7. UNIT AGREEMENT NAME
---

8. FARM OR LEASE NAME
New Mexico ~~Federal~~ "C"

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
Undesignated

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 4, T-21-S, R-32-E

12. COUNTY OR PARISH
Lea

13. STATE
N. M.

14. PERMIT NO.
Letter dated 12-30-76

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3717' GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Production Csg. Test			X
(Other)			☐	(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

3-12-77 Ran 355 jts., 14,104', of 5 1/2" 20# and 17#, N-80, 8rd th and buttress thread, new csg. Set @ 14,124'.

3-13-77 Cmtd. 5 1/2" csg. w/350 sx HOWCO lite w/.6% Halad 22, 5# Gilsonite, & 1/4# Flocele per sx & 525 sx Class "H" w/.8% Halad 22, .4% CFR-2, 3# KCL & 1/4# Flocele per sx. Cmt. circ. Plug down @ 8:00 a.m.

3-14-77 WOC 24 hrs. Tested 5 1/2" csg. w/2400 psi for 30 mins. Held OK.

18. I hereby certify that the foregoing is true and correct

SIGNED Douglas W. Cox TITLE Assistant District Manager DATE 3-23-77

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

ACCEPTED FOR RECORD
MAR 24 1977
U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

5. LEASE DESIGNATION AND SERIAL NO.: NM-14791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: ---

1. OIL WELL ☐ GAS WELL ☒ OTHER

7. UNIT AGREEMENT NAME: ---

2. NAME OF OPERATOR: Cleary Petroleum Corporation

8. FARM OR LEASE NAME: New Mexico ~~Federal~~ "C"

3. ADDRESS OF OPERATOR: P. O. Drawer 2358, Midland, Texas 79702

9. WELL NO.: # 1

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 660' FEL & 1980' FSL

10. FIELD AND POOL, OR WILDCAT: Undesignated

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 4, T-21-S, R-32-E

14. PERMIT NO.: Letter dated 12-30-76

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3717 GR

12. COUNTY OR PARISH: Lea

13. STATE: N. M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) Intermediate Csg. Test	X
(Other)		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

2-2-77 TD 5572'. Hole size 12 1/4". Ran 150 jts. 9 5/8" csg. (40, 43.5, 47 & 53.5#, 8rd, N-80, LT&C). Set @ 5572', DV tool @ 3308'. Cmt 1st stage w/400 sx HOWCO lite & 300 sx Class "C". Cmt. circ. Plug down 1st stage @ 6:30 p.m.

2-3-77 Cmtd. 2nd stage w/1525 sx HOWCO lite w/15% salt and 1/4# flocele/sx, 100 sx Class "C", 2% CC. Cmt. circ. Plug down @ 2:00 p.m. 2-3-77.

2-4-77 Drill out DV tool. Pressure checked 9 5/8" csg to 2000# for 30 min. Held okay.

18. I hereby certify that the foregoing is true and correct

SIGNED Douglas W Rau TITLE Assistant District Manager DATE 2-7-77

(This space for Federal or State office use)

APPROVED BY ___ TITLE ___ DATE ___

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR: Cleary Petroleum Corporation

3. ADDRESS OF OPERATOR: P. O. Drawer 2358, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 660' FEL & 1980' FSL

5. LEASE DESIGNATION AND SERIAL NO.: NM-14791

6. IF INDIAN, ALLOTTEE OR TRIBE NAME: ---

7. UNIT AGREEMENT NAME: ---

8. FARM OR LEASE NAME: New Mexico ~~Federal~~ "C"

9. WELL NO.: 1

10. FIELD AND POOL, OR WILDCAT: Undesignated

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 4, T-21-S, R-32-E

12. COUNTY OR PARISH: Lea

13. STATE: N. M.

14. PERMIT NO.: Letter dated 12-30-76

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3717 GR

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other) Spud date & Surface csg. test			☒
(Other)	☐			(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) *

1-18-77 Spudded 1:00 P.M. by Warton Drlg. Co.

1-19-77 T.D. 472' 17 1/2" hole. Ran 11 jts. 13 3/8" csg. (9 jts. 13 3/8", 48#, H-40, ST&C, R3, 8rd C/A & 2 jts. 13 3/8", 54.5#, K-55, ST&C, R3, 8rd C/A). Set @ 467.70'. Cmtd w/ 1-stage 350 sx Class C, 4% gel, 2% cc, 1/4# Flocele/sx, 2nd-stage 300 sx Class C, 2% cc, 1/4# Flocele/sx. Cmt. circ to surface. WOC 24 hrs.

1-20-77 NU BOP stack. Pressure checked to 1000#. Pressure held okay.

18. I hereby certify that the foregoing is true and correct

SIGNED _____ TITLE Assistant District Manager DATE 1-21-77

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

BM