

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

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

SA. 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 ☐ DEEPEN ☐ PLUG BACK ☒ OIL WELL ☒ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐		NORTHEAST DRINKARD UNIT	
2. Name of Operator SHELL WESTERN E & P INC. (4431 WCK)		8. Farm or Lease Name NORTHEAST DRINKARD UNIT	
3. Address of Operator P.O. BOX 576, Houston, TX 77079		9. Well No. * 202	
4. Location of Well UNIT LETTER <u>I</u> LOCATED <u>467</u> FEET FROM THE <u>East</u> LINE AND <u>3330</u> FEET FROM THE <u>North</u> LINE OF SEC. <u>4</u> TWP. <u>21-S</u> RGE. <u>37-E</u> N.M.P.M.		10. Field and Pool, or Wildcat NORTH FUNICE-BLINEBRY- TUBB-DRINKARD OIL & GAS	
		12. County LEA	
		19. Proposed Depth 6915' (PBDT)	
		15A. Formation Blinebry/Tubb/ Drinkard	
		20. Rotary or C.T. -----	
11. Elevations (Show whether DF, KT, etc.) 3452' GR, 3470' DF		21A. Kind & Status Plug. Bond BLANKET	
		21B. Drilling Contractor WORKOVER RIG	
		22. Approx. Date Work will start UPON APPROVAL	

23.

PROPOSED CASING AND CEMENT PROGRAM * FORMERLY LIVINGSTON # 13 WELL

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-1/2"	61#	1190'	935 sxs total	circ to surf
12-1/4"	9-5/8"	36#	3500'	1200 sxs total	circ to surf
8-3/8"	7"	20,23,26#	8153'	1720 sxs classH	circ to surf

WE PROPOSE TO COMPLETE AS A BLINEBRY/TUBB/DRINKARD OIL PRODUCER FROM SHUT-IN STATUS
(LAST PRODUCTION WAS FROM WANTZ ABO)

- 1) Perf Blinebry 6042' - 6061', Tubb 6084' - 6079' and Drinkard 6550' - 6820' w/ 1 JSPF.
- 2) Selectively AT Blinebry/Tubb/Drinkard perfs (6042' - 6820') w/ 8400 gals 15% NEFE HCl acid + 70 ball sealers, using RBP's and pkr's.
- 3) Perf Blinebry 5757' - 5993' w/ 1JSPF.
- 4) Selectively AT Blinebry 5757' - 5993' w/ 50 gals 15% NEFE HCl acid + 48 ball sealers, using RBP and pkr.
- 5) Pres test to 500 psi for 30 min.
- 6) TIH w/ prod equip and return well to 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 A.J. FORE Title SUPERVISOR REGULATORY & PERMITTING Date NOV 30 1988

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

DEC 6 1988