## SUBMIT IN TRIPL

(Other instructions on reverse side)

Budget	Bureau	No.	42-R14

UNITED STATES	
DEPARTMENT OF THE INTERIOR	

	DEPARTMENT OF THE INTERIOR			5. LEASE DESIGNATION AND SERIAL NO.
		SICAL SURVEY	AMENDE	
APPLICATION	FOR PERMIT T	O DRILL, DEEPE	N, OR PLUG B	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1a. TYPE OF WORK	LL 🕱	DEEPEN	PLUG BA	7. UNIT AGREEMENT NAME  NMFU
OIL GA	ELL OTHER	SI: ZO	NE Z MULTIP	- O. PARA OR BEASE NAME
0 14 11 11 11 11 11 11 11 11 11 11 11 11	CONOCO INC.			Nleyer A-1
3. ADDRESS OF OPERATOR	P. O. Box 460, Hob	10. FIELD AND POOL, OR WILDCAT		
1780 FS At proposed prod. zon	L & 2030 FW	in accordance with any S		11. SEC., T., R., M., OB BLE. AND SURVEY OF AREA  SCC. 8-215-36E  12. COUNTY OF PARISH 13. STATE
15. DISTANCE FROM PROPO LOCATION TO NEAREST PROPERTY OR LEASE I (Also to nearest drig	r .INE, FT. g. unit line, if any;		OF ACRES IN LEASE	17. NO. OF ACRES ASSIGNED TO THIS WELL
18. DISTANCE FROM PROP TO NEAREST WELL, D OR APPLIED FOR, ON TH	OSED LOCATION* RILLING, COMPLETED,	19. PR	3850	20. ROTARY OR CABLE TOOLS ROTARY
21. ELEVATIONS (Show who	ether DF, RT, GR, etc.)			December 2019
23.	F	PROPOSED CASING ANI	CEMENTING PROGR	AM
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
1214"	8 5/8"	28#	1260	5625x5 Class"C", CITC.
7 /8"	5/5"	14#	3850	687 5X5 "/19ht"; CICC.

The subject well has an approved Application for Permit to Prill dated 9-11-85 and approved on 9/25/85. The location of the well has been changed from 1880' FSL & 1980' FWL, Section 8-215-36, Lea County to 1790' FSL & 2030' FWL, Section 8-215-36 E Lea County. A new survey plat and Archaeological Clearance Report are attached. The Surface Use will not change from the Plan approved 9/25/85.

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.  $\overline{24}$ . Administrative Surervisor TITLE (This space for Federal or State office use) PERMIT NO. APPROVED BY CONDITIONS OF APPROVAL, IF ANY

RECEIVED

DEC 26 1985

O.C.D. HOBES OFFICE